

2009 Montana Partnership Information and Composite Tax Return Attach a copy of federal Form 1065 and Schedule(s) K-1 alendar year 2009 or tax year beginning (MM-DD) - - 09 and ending (MM-DD-YY) -

For calendar year 2009	or tax year	Deginning (ועוט-טט) <u>uy</u> and er	iding (IVIIVI-DD-YY)	
Name					aut.
Bridger Industrial	Park L	P		FEIN:	
Mailing Address		If new add	Iress, check here.		
1276 N 15th Ave			Mari	Federal Business Code:	531120
City	State		Zip + 4	A Franklin manage of the first	**************************************
Bozeman	MT		59715+0000	Date Registered in Mont	ana:
I do not need the Montana Pa	rtnership Info	ormation Return and I	nstructions sent to me n	ext vear.	
☐ I am <i>requesting a refund</i> with	n this tax retu	ırn.			ATT OF SECTION AND A SECTION ASSECTION ASSECTI
Check if this is an initial return Check if this is a final return Reason for final return: a. Withdrawn b. Dissolved c. Merged d. Reorganized		a. Federal Rev b. Apportionme c. Amended fed d. Amended co e. Other (attack	above, check below all enue Agent Report (a co ent factor changes (attac deral return mposite return n a statement explaining	the reasons for amending mplete copy of this report has statement explaining a all adjustments in detail)	is required)
Partners' Distributive Share	•	•	•	,	
 Ordinary business income 					
Net rental real estate incor	me (loss) (att	tach federal Form 882	5)	2.	489,880
a. Other gross rental incor					
 b. Expenses from other re 	ental activities	s (attach schedule)		3b.	
 c. Subtract line 3b from lir 	ne 3a. This i s	s your other net rent	al income or loss	3c.	
4. Guaranteed payments			***************************************	4.	
5. Interest income			***************************************	5.	3,640
6. Ordinary dividends				6.	
7. Royalties					
8. Net short-term capital gain					
9. Net long-term capital gain					
10. Net section 1231 gain (los			•	· · · · · · · · · · · · · · · · · · ·	
11. Other income (loss) (attac					
12. Add lines 1 through 11 and					493,520
Partners' Shares of Deduction			nare or moonie or 1033.	• • • • • • • • • • • • • • • • • • • •	493,320
13. Section 179 deduction (att				12 [
14. a. Contributions					2,000
b. Investment interest exp					2,000
c. Section 59(e)(2) expend					
d. Other deductions (attac					2 000
15. Add lines 13 through 14d a		-			2,000
Partners' Distributive Shares 16. a. Interest and dividends is (see instructions)	not taxable u	nder the Internal Reve			
b. Taxes based on income					
c. Other additions (attach					
Add lines 16a, 16b, and 16		•			
17. a. Interest on U.S. govern		=			
b. Deduction for purchasir					
c. Other deductions (attac					
Add lines 17a, 17b, and 17 18. Subtract line 15 from line 1 taxable income (loss)	12. Add the re	esult to line 16, then s	ubtract line 17 from that	result. This is your net	491,520
Partners' Distributive Shares	of Multist	ate Apportionmen	t and Allocation	10.	,
19. Income apportioned to Mo				5: enter the result 19 l	
20. Income allocated to Monta					
21. Add lines 19 and 20; enter					

Calculation of Amount Owed or Refund		
Partnership Composite Return Tax		
22. Enter your Montana total composite tax from Schedule III, column F	22.	
Partner Backup Withholding	L	
23. Enter the amount of total partner withholding from Schedule III, column G	23.	
Partnership Montana Mineral Royalty Tax Withheld	-	
24. a. Total Montana mineral royalty tax withheld as reported on federal Form(s) 1099 24a	а.	
b. Mineral royalty tax withheld attributable to Montana residents24k	D.	
c. Mineral royalty tax withheld attributable to nonresidents not reporting on Schedule IV	c.	
d. Add lines 24b and 24c. This is the total mineral royalty tax withheld reported by		
partners on their income tax returns		
e. Subtract line 24d from 24a. This is the mineral royalty tax withheld attributable to non Schedule IV		
Return Payments	f	
25. a. 2008 overpayment applied to 2009		
b. 2009 estimated payments		
c. 2009 extension payment		
d. Montana income tax withheld. Attach Form PT-WH		
e. For amended returns only—payments made with original return (see instructions) 25c		
f. For amended returns only—previously issued refunds (see instructions)		
g. Add lines 25a through 25e; then subtract line 25f and enter the result here. This is yo payments.		
26. Add lines 22 and 23, then subtract lines 24e and 25g. This is your amount due or (over	~ L	
Penalties and Interest (see instructions)	. ,	· · · · · · · · · · · · · · · · · · ·
27. a. Partnership information return late filing penalty	a.	
b. Interest on underpayment of estimated composite tax		
b. Interest on underpayment of estimated composite tax	э.	
	o	
c. Composite income tax return late filing penalty27	o	
c. Composite income tax return late filing penalty 270 d. Late payment penalty 270 e. Interest 270	o. c. d. e.	
c. Composite income tax return late filing penalty	o. c. d. e.	
c. Composite income tax return late filing penalty 27d d. Late payment penalty 27d e. Interest 27d f. Add lines 27a through 27e. This is your total penalties and interest.	o	
c. Composite income tax return late filing penalty 276 d. Late payment penalty 276 e. Interest 276 f. Add lines 27a through 27e. This is your total penalties and interest.	o	
c. Composite income tax return late filing penalty 270 d. Late payment penalty 270 e. Interest 270 f. Add lines 27a through 27e. This is your total penalties and interest. Amount Owed or Refund 28. Add lines 26 and 27f; enter the result here.	27f	
c. Composite income tax return late filing penalty 270 d. Late payment penalty 270 e. Interest. 270 f. Add lines 27a through 27e. This is your total penalties and interest. 270 Amount Owed or Refund 28. Add lines 26 and 27f; enter the result here. 29. If line 28 results in an amount due, enter it here. This is the amount you owe.	27f	
c. Composite income tax return late filing penalty 270 d. Late payment penalty 270 e. Interest 270 f. Add lines 27a through 27e. This is your total penalties and interest. Amount Owed or Refund 28. Add lines 26 and 27f; enter the result here 29. If line 28 results in an amount due, enter it here. This is the amount you owe. 30. If line 28 results in an overpayment, enter it here. This is your overpayment.	27f	
c. Composite income tax return late filing penalty 270 d. Late payment penalty 270 e. Interest 270 f. Add lines 270 through 270. This is your total penalties and interest. Amount Owed or Refund 28. Add lines 26 and 27f; enter the result here. 29. If line 28 results in an amount due, enter it here. This is the amount you owe. 30. If line 28 results in an overpayment, enter it here. This is your overpayment. 31. Enter the amount from line 30 you want applied to your 2010 composite estimated tax 30 32. Subtract line 31 from line 30 and enter the amount here. This is your refund.	27f	
c. Composite income tax return late filing penalty 270 d. Late payment penalty 270 e. Interest 270 f. Add lines 270 through 27e. This is your total penalties and interest. Amount Owed or Refund 28. Add lines 26 and 27f; enter the result here. 29. If line 28 results in an amount due, enter it here. This is the amount you owe. 30. If line 28 results in an overpayment, enter it here. This is your overpayment. 31. Enter the amount from line 30 you want applied to your 2010 composite estimated tax 30. Subtract line 31 from line 30 and enter the amount here. This is your refund.	27f	
c. Composite income tax return late filing penalty 270 d. Late payment penalty 270 e. Interest. 270 f. Add lines 27a through 27e. This is your total penalties and interest. 276 Amount Owed or Refund 28. Add lines 26 and 27f; enter the result here. 29. If line 28 results in an amount due, enter it here. This is the amount you owe. 30. If line 28 results in an overpayment, enter it here. This is your overpayment. 31. Enter the amount from line 30 you want applied to your 2010 composite estimated tax . 37 32. Subtract line 31 from line 30 and enter the amount here. This is your refund. 2. ACCT# 2. ACC	27f	ngs
c. Composite income tax return late filing penalty 270 d. Late payment penalty 270 e. Interest 270 f. Add lines 270 through 27e. This is your total penalties and interest. Amount Owed or Refund 28. Add lines 26 and 27f; enter the result here. 29. If line 28 results in an amount due, enter it here. This is the amount you owe. 30. If line 28 results in an overpayment, enter it here. This is your overpayment. 31. Enter the amount from line 30 you want applied to your 2010 composite estimated tax 30 32. Subtract line 31 from line 30 and enter the amount here. This is your refund. For Direct Deposit of your refund, complete 1, 1. RTN# 2. ACCT#	28	•
c. Composite income tax return late filing penalty 270 d. Late payment penalty 270 e. Interest 270 f. Add lines 270 through 27e. This is your total penalties and interest. Amount Owed or Refund 28. Add lines 26 and 27f; enter the result here. 29. If line 28 results in an amount due, enter it here. This is the amount you owe. 30. If line 28 results in an overpayment, enter it here. This is your overpayment. 31. Enter the amount from line 30 you want applied to your 2010 composite estimated tax 3 32. Subtract line 31 from line 30 and enter the amount here. This is your refund. For Direct Deposit of your refund, complete 1, 2, 3, and 4. Please see instructions on page 8. 1. RTN# 2. ACCT# 2. ACCT# 4. Is this refund going to an account that is located outside of the United 9.	28	Yes N
c. Composite income tax return late filing penalty 270 d. Late payment penalty 270 e. Interest. 270 f. Add lines 27a through 27e. This is your total penalties and interest. 270 Amount Owed or Refund 28. Add lines 26 and 27f; enter the result here. 29. If line 28 results in an amount due, enter it here. This is the amount you owe. 30. If line 28 results in an overpayment, enter it here. This is your overpayment. 31. Enter the amount from line 30 you want applied to your 2010 composite estimated tax 3′ 32. Subtract line 31 from line 30 and enter the amount here. This is your refund. 2. ACCT# 2. ACCT# 2. ACCT# 2. ACCT# 3. If using direct deposit, you are required to mark one box. ▶ □ Composite entered to mark one box.	28	Yes N
c. Composite income tax return late filing penalty 270 d. Late payment penalty 270 e. Interest 270 f. Add lines 270 through 27e. This is your total penalties and interest. Amount Owed or Refund 28. Add lines 26 and 27f; enter the result here. 29. If line 28 results in an amount due, enter it here. This is the amount you owe. 30. If line 28 results in an overpayment, enter it here. This is your overpayment. 31. Enter the amount from line 30 you want applied to your 2010 composite estimated tax 3 32. Subtract line 31 from line 30 and enter the amount here. This is your refund. For Direct Deposit of your refund, complete 1, 2, 3, and 4. Please see instructions on page 8. 1. RTN# 2. ACCT# 2. ACCT# 4. Is this refund going to an account that is located outside of the United 9.	28	Yes N

I, the undersigned general partner or limited liability company member of the partnership for which this tax return is made, hereby declare that this tax return, including all accompanying schedules and statements, is to the best of my knowledge and belief a true, correct and complete return, made in good faith for the income period stated, pursuant to the Montana statutes and regulations. Signature of general partner or LLC member manager Date Printed name and title Telephone number

12-31-2008 Schedule III
Entity name BRIDGER INDUSTRIAL PARK LPTax period ending ___

Montana Partnership Information

FEIN

Summary Schedule of Income and Supplemental Information

Resident Partners Section A:

Partner Withholding:	Сотроя	T	Numbe	Total Number of Partners	12			2						
٥	Income (See Instructions)	235,930			78,642			39,322			39.322			
ပ	Ownership %	48%	1		16%	T		%	-		88			80%
8	Identification Number	SSN	PEIN		SSN	FEIN		SSN	FEIN		NSS	FEIN		
Ą	Name Street Address City State Zip Code	1. GENE COOK	1276 N 15TH AVENUE	BOZEMAN, MT 59715	2. CARL LEHRKIND	PO BOX 10580	BOZEMAN, MT 59715	3. LORI FILIPPINI	308 PRICE ROAD	THREE FORKS, MT 59752	4. VINCENT FILIPPINI	308 PRICE ROAD	THREE FORKS, MT 59752	Section A Totals

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Nonresident Individual Partners or Second Tier Pass-Through Entity Partners Section B:

	aluleis of Second 11er	455-11110U	nei rass-imougii ciiniy rarmers	J.S.			
A	8	ပ	O	ш	L	9	Ξ
Name Street Address City State Zip Code	Identification Number SSN/FEIN	Ownership %	Ownership Montana Source Income (See Instructions)	Federal Income from Entity (from federal Schedule K-1)	Composite Income Tax (from Schedule IV, column J)	Composite Income Partner Withholding Consent Tax (from Schedule (from Schedule V, Agreement IV, column J) column D or E) (year)	Consent Agreement (year)
1,	SSN						
	FEIN						
			٠			-	
2.	NSS						
	HEIN						
3.	SSN						
	PEIN						
Section B Totals							
Total of Sections A and B, column C only		100%					
Use additional sheets if necessary or you may use a document formatted similarly to Schedule III as a substitute.	se a document formatted sim	ilarly to Sche	dule III as a substit	ute.			

Schedule III - Form PR-1, page 5
Entity name <u>Bridger Industrial Park LP</u>Tax period ending 12-31-2008

Montana Partnership Information

FEIN

Summary Schedule of Income and Supplemental Information

Resident Partners Section A:

	Dartner Wittholding:) (Composite income lax:		Number of Resident Partners 8	Number of Nonresident Partners	Total Number of Partners 8						1	For each nonresident partner, complete ONLY	refer to the instructions for Schedule III	T 9	ncome Composite Income Partner Withholding Agreement (see instructions) (year)								
۵	Montana Source Income (see instructions)	39,322			39,321			9,831			9,830				d Tier Pass-Through Entity Partners	Δ	Montana Source Federal Income Income from Entity (from See instructions) federal Schedule K-1)								
ပ	Ownership Mo % (se	0/o			% %			2%			2%			20%	ass-Through	Ø	Ownership Mo % (see			•					
æ	Identification Number SSN/FEIN	SŠN	LEIN		SSN	FEIN		NSS	FEIN		NSS	FEIN			artners or Second Tier P		Identification Number SSN/FEIN	SSN	FEIN		SSN	FEIN	NSS	FEIN	
A	Name Street Address or P O Box City State Zip Code	1. Lisa Edwards	3622 Fieldstone Dr	Bozeman, MT 59715	2. Lance Edwards	3622 Fieldstone Dr	Bozeman, MT 59715	3. G&M Enterprises, LLC	1276 N 15th Ave	Bozeman, MT 59715	4. Lehrkind Properties, LLP	PO Box 10580	Bozeman, MT 59719	Section A Totals	Section B: Nonresident Individual Partners or Second		Name Street Address or P O Box City State Zip Code				2.		3.		

Total of Sections A and B, column C only

Section B Totals

100%

Transfer the total from Column G to Form PR-1, page 2, line 23. Use additional sheets if necessary or you may use a document formatted similarly to Schedule III as a substitute.

Transfer the total from Column F to Form PR-1, page 2, line 22.

Montana Schedule K-1 (CLT-4S and PR-1) Partner's/Shareholder's Share of Income (Loss), Deductions, Credits, etc.

For the year January 1 - December 31, 2009, or tax year beginning		$\underline{\hspace{1cm}}$ and ending $\underline{\hspace{1cm}}$	
Part 1 - Pass-Through Entity Information			
A Entity's federal employer identification number (FEIN)		Check applicable b	JOYAS'
B Entity's name and mailing address Bridger Industrial Park, LP		☐ Form CLT-4S	Amended K-1
	<u> </u>	Form PR-1	☐ Final K-1
1276 N 15th Ave, Suite 13	c		if this is a publicly traded
Bozeman, MT 59715		partnership.	
Part 2 - Partner/Shareholder Information			
A Partner's/shareholder's identifying number (SSN/FEIN)	D Check this bo	ox if partner/shareholde	er is a nonresident:
B Partner's/shareholder's name and mailing address	If a nonresid	ent, please check this l	box if a Montana Form PT-AGR,
Gene Cook	nonresident	agreement has been fil	led for partner/shareholder
1276 N 15th Ave, Suite 13	E Shareholder's	s percentage of stock of	ownership %
Bozeman, MT 59715	F Partner's:		nning Ending
	Profit		0000 % 48.0000000 %
DWL	Loss		0000 % 48.0000000 %
C What type of entity is this partner/shareholder? _Individual	Capital	48.000	00000% 48.0000000 %
Part 3 - All Partners/ShareholdersMontana Adjustments			-
A Federal Schedule K-1 income (loss) minus deductions	Δ	235 930	Information only; see instructions.
B Montana additions to income	······································	233,930	, information only, see instructions.
Federally tax-exempt interest	R1		
Taxes based on income or profits	B2 -		•
3. Other additions. List type and amount	R3 -		
C Montana subtractions from Income			•
Interest from U.S. Treasury obligations	C1		
Deduction for purchasing recycled material			•
3. Other subtractions. List type and amount .	_		•
D Multistate pass-through entities	-	77.00	
Apportioned income. Income apportioned to Montana	D1		Information only see instructions
Allocable income. Income allocated to Montana. List type			Information only; see instructions
E Total income taxable to partner/shareholder	and amount D2		Information only; see instructions
Part 4 - Nonresident Individual, Estate or Trust Beneficiary Only-Montana Source			Information only; see instructions
Montana apportionment percentage		A Q %	Information only; see instructions
Ordinary business income (loss)		10 /0	information only, see instructions
Net rental real estate income (loss)		025 142	
4. Other net rental income (loss)		235,143	
5. Guaranteed payments			
6. Interest income	-		,
7. Ordinary dividends	_	1,747	,
8. Royalties			,
9. Net short-term capital gain (loss)			
10. Net long-term capital gain (loss)			
11. Net section 1231 gain (loss)			
12. Other income (loss). List type and amount			,
13. Montana composite income tax paid on behalf of partner/shareholder			,
Montana composite income tax paid on behalf of partner/shareholder 14. Montana income tax withheld on behalf of partner/shareholder	_		,
Part 5 - Supplemental Information	14		,
1 Promiums for Incure Mentana Cmall Pusiness Health Incure and available available	, -		
Premiums for Insure Montana Small Business Health Insurance credit expenses. Film Production Conditions and Condition		****	•
Film Production Credit expenses Mineral royalties tax withholding			•
			•
4. Other information. List type and amount Part 6 - Montana Tax Credits and Recapture (If Applicable)	4		,
Insure Montana Small Business Health Insurance credit. Business FEIN	4 -		,
Health insurance for uninsured Montanans credit (Form HI)			,
Contractor's gross receipts tax credit	··············		,
4. Other credit/recapture information. List type 4. Other credit/recapture information.			•

Montana Schedule K-1

(CLT-4S and PR-1)
Partner's/Shareholder's Share of Income (Loss), Deductions, Credits, etc.

For the year January 1 - December 31, 2009, or tax year beginning	r		a	nd ending		•
Part 1 - Pass-Through Entity Information						
A Entity's federal employer identification number (FEIN)			Che	ck applicable b		
B Entity's name and mailing address				Form CLT-4S	_	nended K-1
Bridger Industrial Park, LP				Form PR-1	☐ Fin	
1276 N 15th Ave, Suite 13	Ī	С		Check this box	if this is a pi	ublicly traded
Bozeman, MT 59715				partnership.	·	•
Part 2 - Partner/Shareholder Information	•					
A Partner's/shareholder's identifying number (SSN/FEIN)	D Check this	box	if pai	tner/shareholde	r is a nonres	sident:
B Partner's/shareholder's name and mailing address			-			tana Form PT-AGR,
Carl Lehrkind, IV				ent has been fil		
PO Box 10580	<u> </u>			ntage of stock o		%
Bozeman, MT 59719-0580	F Partner's:	51 5	peroc		nning	Ending
·	Profit					16.0000000 %
	Loss					16.0000000 %
C What type of entity is this partner/shareholder? <u>Individual</u>	Capital					16.0000000 %
	Capital			10.000	0000 /6	10.0000000 /
Part 3 - All Partners/Shareholders-Montana Adjustments						
A Federal Schedule K-1 income (loss) minus deductions	A.	_		78,642	Information	only; see instructions.
B Montana additions to income						
Federally tax-exempt interest	B1	۱				
2. Taxes based on income or profits	B2	<u>.</u> _				
3. Other additions. List type and amount	B3	^{3.} _				
C Montana subtractions from Income						
Interest from U.S. Treasury obligations	C1	٠_				
Deduction for purchasing recycled material		<u>.</u> _				
3. Other subtractions. List type and amount	C3	3. <u> </u>				
D Multistate pass-through entities						
Apportioned income. Income apportioned to Montana	D1				Information	only; see instructions
Allocable income. Income allocated to Montana. List type a	nd amount D2	:			Information	only; see instructions
E Total income taxable to partner/shareholder	E.	_			Information	only; see instructions
Part 4 - Nonresident Individual, Estate or Trust Beneficiary Only-Montana Source I						•
Montana apportionment percentage				16%	Information	only; see instructions
Ordinary business income (loss)	2.	_				
3. Net rental real estate income (loss)	3.	_		78,380		
4. Other net rental income (loss)	4.	_		· · · · · · · · · · · · · · · · · · ·		
5. Guaranteed payments	5.	_				
6. Interest income	_	_		582		
7. Ordinary dividends	7.					
8. Royalties	8.	-				
9. Net short-term capital gain (loss)	9.	-				
10. Net long-term capital gain (loss)). —				
11. Net section 1231 gain (loss)	11	` -				
12. Other income (loss). List type and amount	12)				
13. Montana composite income tax paid on behalf of partner/shareholder						
14. Montana income tax withheld on behalf of partner/shareholder	14	· –				
Part 5 - Supplemental Information		· –				
Premiums for Insure Montana Small Business Health Insurance credit expenses	1	_				
2. Film Production Credit expenses		· –			i	
Mineral royalties tax withholding	ک ع	_		7'1		
4. Other information. List type and amount		· –			'	
Part 6 - Montana Tax Credits and Recapture (If Applicable)	4.	_				
Insure Montana Small Business Health Insurance credit Business FEIN	1	-				
Health insurance for uninsured Montanans credit (Form HI)	1.	_				
Contractor's gross receipts tax credit	ک ع	_		B. 10 - A - 1		
4. Other credit/recapture information. List type a	and amount A	· –				
4. Other declinedapture information. List type	and amount4,	_				

Montana Sche (CLT-4S and					
Partner's/Shareholder's Share of Income		tions. Cr	edits, etc.		
For the year January 1 - December 31, 2009, or tax year beginning			d ending _		•
Part 1 - Pass-Through Entity Information					
A Entity's federal employer identification number (FEIN)		Chec	k applicable	boxes:	
B Entity's name and mailing address Bridger Industrial Park, LP			orm CLT-4S orm PR-1		nended K-1 nal K-1
1276 N 15th Ave, Suite 13	ŀ		Check this box		
Bozeman, MT 59715			partnership.	(ii iiiio io a p	ubliciy traded
Part 2 - Partner/Shareholder Information A Partner's/shareholder's identifying number (SSN/FEIN)	In our at	1 - 7 - 1	f.l . 1 11		· · · ·
B Partner's/shareholder's name and mailing address		•	ner/sharehold		
Lori Filippini					tana Form PT-AGR,
308 Price Road		•		•	er/shareholder 🔲
Three Forks, MT 59715		er's percen	tage of stock		· · · · · · · · · · · · · · · · · · ·
	F Partner's:			inning	Ending
· · · · · · · · · · · · · · · · · · ·	Profit				8.0000000 % 8.0000000 %
C What type of entity is this partner/shareholder? <u>Individual</u>	Loss	·			ļ
Part 3 - All Partners/Shareholders-Montana Adjustments	Capital		1 0.00	70 000 70	8.0000000 %
A Federal Schedule K-1 income (loss) minus deductions	Δ		39,322	Information	only; see instructions.
B Montana additions to income			- ,		omy, ode matruotiona.
1. Federally tax-exempt interest	B1				
2. Taxes based on income or profits	B2	. —		-	
3. Other additions. List type and amount	B3			<u>.</u>	
C Montana subtractions from Income				_	
1. Interest from U.S. Treasury obligations	C1	·			
Deduction for purchasing recycled material				_	
3. Other subtractions. List type and amount D Multistate pass-through entities		·		-	
	D.1		<u> </u>	1.6	
Apportioned income. Income apportioned to Montana Allocable income. Income allocated to Montana. List type	and amount D?	·		-	only; see instructions
E Total income taxable to partner/shareholder				•	only; see instructions only; see instructions
Part 4 - Nonresident Individual, Estate or Trust Beneficiary Only-Montana Source				_ IIIIOIIIIauoii	only, see instructions
Montana apportionment percentage			8 %	Information	only; see instructions
Ordinary business income (loss)				•	,
3. Net rental real estate income (loss)	3.		39,191	•	
4. Other net rental income (loss)	4.			•	
5. Guaranteed payments				•	
6. Interest income			291	-	
7. Ordinary dividends				•	`
8. Royalties				•	ı
9. Net short-term capital gain (loss)				_	•
10. Net long-term capital gain (loss)				•	
12. Other income (loss). List type and amount				-	
Montana composite income tax paid on behalf of partner/shareholder				•	
14. Montana income tax withheld on behalf of partner/shareholder				-	
Part 5 - Supplemental Information				•	
Premiums for Insure Montana Small Business Health Insurance credit expenses	s 1.			•	
Film Production Credit expenses	2.			•	
3. Mineral royalties tax withholding				•	•
4. Other information. List type and amount				-	
Part 6 - Montana Tax Credits and Recapture (If Applicable)				-	
Insure Montana Small Business Health Insurance credit. Business FEIN	1.			_	
Health insurance for uninsured Montanans credit (Form HI)	2.			•	
Contractor's gross receipts tax credit Other credit/recapture information. List type				-	
T. Outer decime capture initiality. List type	anu amount 4				

Montana Schedule K-1 (CLT-4S and PR-1) Partner's/Shareholder's Share of Income (Loss), Deductions, Credits, etc.

		and ending
Part 1 - Pass-Through Entity Information A Entity's federal employer identification number (FEIN)		
		Check applicable boxes:
B Entity's name and mailing address Bridger Industrial Park, LP		☐ Form CLT-4S ☐ Amended K-1 ☐ Form PR-1 ☐ Final K-1
1276 N 15th Ave, Suite 13	c	
Bozeman, MT 59715		partnership.
Part 2 - Partner/Shareholder Information		
A Partner's/shareholder's identifying number (SSN/FEIN)	D Check this be	box if partner/shareholder is a nonresident:
B Partner's/shareholder's name and mailing address	If a nonresid	ident, please check this box if a Montana Form PT-AGR,
Vincent Filippini		at agreement has been filed for partner/shareholder
308 Price Road		r's percentage of stock ownership
Three Forks, MT 59752		
	F Partner's:	Beginning Ending 8.0000000% 8.0000000 %
	Profit	8.0000000 % 8.0000000 %
C What type of entity is this partner/shareholder? <u>Individual</u>	Loss Capital	8.0000000 % 8.0000000 %
2-40 AUD-4(0)1-11	Сарітаі	8.000000 % 8.000000 %
Part 3 - All Partners/Shareholders-Montana Adjustments		
A Federal Schedule K-1 income (loss) minus deductions	A	39,322 Information only; see instructions.
B Montana additions to income		
1. Federally tax-exempt interest	B1	,
2. Taxes based on income or profits	B2	·
3. Other additions. List type and amount	B3.	
C Montana subtractions from Income	0.4	
Interest from U.S. Treasury obligations	C1.	
2. Deduction for purchasing recycled material		
3. Other subtractions. List type and amount		
D Multistate pass-through entities		-
Apportioned income. Income apportioned to Montana	D1.	Information only; see instructions
2. Allocable income. Income allocated to Montana. List type a	and amountD2.	
E Total income taxable to partner/shareholder		Information only; see instructions
Part 4 - Nonresident Individual, Estate or Trust Beneficiary Only-Montana Source I		00/16 6 1 1 1 1
Montana apportionment percentage Ordinary business income (loss)		8 % Information only; see instructions
Net rental real estate income (loss) Other net rental income (loss)		
• •		
5. Guaranteed payments		
6. Interest income		292
7. Ordinary dividends		
8. Royalties		
9. Net short-term capital gain (loss)	9.	
10. Net long-term capital gain (loss)	10.	-
11. Net section 1231 gain (loss)	11.	
12. Other income (loss). List type and amount	12.	
13. Montana composite income tax paid on behalf of partner/shareholder	13	
14. Montana income tax withheld on behalf of partner/shareholder	14	
1. Promiume for Incure Montana Small Pusiness Licelth Incurence are 24 and a second		
Premiums for Insure Montana Small Business Health Insurance credit expenses. Film Production Credit expenses.	······································	
Film Production Credit expenses. Mineral revoltion to withholding.	2	
3. Mineral royalties tax withholding	3	
4. Other information. List type and amount art 6 - Montana Tax Credits and Recapture (If Applicable)	4. -	
Insure Montana Small Business Health Insurance credit. Business FEIN	, -	
Health insurance for uninsured Montanans credit (Form HI)	· · ·	
Contractor's gross receipts tax credit		
4. Other credit/recapture information. List type a		
i. Outer erounteeapture internation, List type	anu amount4	

Montana Schedule K-1

(CLT-4S and PR-1)
Partner's/Shareholder's Share of Income (Loss), Deductions, Credits, etc.

For the year January 1 - December 31, 2009, or tax year beginning			and ending _		<u></u> .• -
Part 1 - Pass-Through Entity Information					
A Entity's federal employer identification number (FEIN)		Ch	eck applicable b	oxes:	
B Entity's name and mailing address Bridger Industrial Park, LP			Form CLT-4S Form PR-1		nended K-1 al K-1
1276 N 15th Ave, Suite 13			Check this box		
Bozeman, MT 59715			partnership.	ii tiilo io a pt	blidy traded
Part 2 - Partner/Shareholder Information					
A Partner's/shareholder's identifying number (SSN/FEIN)	D Check this	s box if p	artner/shareholde	er is a nonres	sident:
B Partner's/shareholder's name and mailing address Lisa Edwards			lease check this t ment has been fil		ana Form PT-AGR, er/shareholder
3622 Fieldstone Drive West			entage of stock of		%
Bozeman, MT 59715	F Partner's:		<u>`</u>		Ending
	Profit			nning	8.0000000 %
					8.0000000 %
C What type of entity is this partner/shareholder? <u>Individual</u>	Loss Capital				8.0000000 %
Part 3 - All Partners/Shareholders–Montana Adjustments			···		
A Federal Schedule K-1 income (loss) minus deductions	A		39,322	Information	only; see instructions
B Montana additions to income					
1. Federally tax-exempt interest				,	
2. Taxes based on income or profits					
3. Other additions. List type and amount	B	3			
C Montana subtractions from Income					
1. Interest from U.S. Treasury obligations	C	1			
Deduction for purchasing recycled material	C:	^{2.} —			
3. Other subtractions. List type and amount	C:	^{3.} ——			
D Multistate pass-through entities					
1. Apportioned income. Income apportioned to Montana	D	1			only; see instructions
2. Allocable income. Income allocated to Montana. List type al				1	only; see instructions
E Total income taxable to partner/shareholder				Information	only; see instructions
Part 4 - Nonresident Individual, Estate or Trust Beneficiary Only–Montana Source In			2.44		
Montana apportionment percentage			8 %	Information	only; see instructions
2. Ordinary business income (loss)					
3. Net rental real estate income (loss)			39,191		
4. Other net rental income (loss)					
5. Guaranteed payments					•
6. Interest income			291	,	
7. Ordinary dividends				•	
8. Royalties				1	
9. Net short-term capital gain (loss)				•	
10. Net long-term capital gain (loss)					
11. Net section 1231 gain (loss)				•	
12. Other income (loss). List type and amount		۷		,	
13. Montana composite income tax paid on behalf of partner/shareholder		». ——		•	
14. Montana income tax withheld on behalf of partner/shareholder	1	^{4.}			
Part 5 - Supplemental Information				•	
Premiums for Insure Montana Small Business Health Insurance credit expenses Film Production Credit expenses		· —	• .	. 1	
Film Production Credit expenses. Minoral royalties for withholding.					
3. Mineral royalties tax withholding					
4. Other information. List type and amount art 6 - Montana Tax Credits and Recapture (If Applicable)	4	·		. 1	
	4		· · · · · · · · · · · · · · · · · · ·	•	
Insure Montana Small Business Health Insurance credit. Business FEIN Health insurance for uninsured Montanans credit (Form HI)	!	; .—		•	
The alth insurance for uninsured Montanans credit (Form HI) Contractor's gross receipts tax credit				•	
Contractor's gross receipts tax credit				•	
4 Under Credit/recapture Information LIST IVDE	mriam∧unt 4	L .			

Montana Schedule K-1 (CLT-4S and PR-1) Partner's/Shareholder's Share of Income (Loss), Deductions, Credits, etc.

For the year January 1 - December 31, 2009, or tax year beginning		and ending _	
Part 1 - Pass-Through Entity Information			
A Entity's federal employer identification number (FEIN)		Check applicable	boxes:
B Entity's name and mailing address Bridger Industrial Park, LP		Form CLT-4S Form PR-1	Amended K-1 Final K-1
1276 N 15th Ave, Suite 13	ŀ	C	x if this is a publicly traded
Bozeman, MT 59715		partnership.	will the to a pasticity tradea
Part 2 - Partner/Shareholder Information			
A Partner's/shareholder's identifying number (SSN/FEIN)	_ D Check this	box if partner/sharehold	ler is a nonresident:
B Partner's/shareholder's name and mailing address	If a nonres	ident, please check this	box if a Montana Form PT-AGR,
Lance Edwards		•	filed for partner/shareholder
3622 Fieldstone Drive West		er's percentage of stock	· · · · · · · · · · · · · · · · · · ·
Bozeman, MT 59715	F Partner's:		ginning Ending
	Profit		00000% 8.0000000 %
	Loss		00000% 8.0000000 %
C What type of entity is this partner/shareholder? Individual	- Capital		00000% 8.0000000 %
Dest 2 All Destar 101 and bell as 10 at 11 at 1	Capital		<u> </u>
Part 3 - All Partners/Shareholders–Montana Adjustments			
A Federal Schedule K-1 income (loss) minus deductions	A.	39,321	_Information only; see instructions.
B Montana additions to income			
1. Federally tax-exempt interest			_
2. Taxes based on income or profits			_
3. Other additions. List type and amount	B3		_
C Montana subtractions from Income	0.4		
Interest from U.S. Treasury obligations Deduction for purchasing recycled material		•	_
3. Other subtractions. List type and amount		•	_
D Multistate pass-through entities	i U3	•	-
1. Apportioned income. Income apportioned to Montana			_Information only; see instructions
2. Allocable income. Income allocated to Montana. List type		•	Information only; see instructions
E Total income taxable to partner/shareholder			Information only; see instructions
Part 4 - Nonresident Individual, Estate or Trust Beneficiary Only-Montana Source		0.0/	to form a transfer of the second seco
Montana apportionment percentage		8 %	Information only; see instructions
Ordinary business income (loss) Not routel real solution income (loss)		20.100	-
Net rental real estate income (loss) Other net rental income (loss)		39,190	_
			_
5. Guaranteed payments		291	_
			_
7. Ordinary dividends			_
9. Net short-term capital gain (loss)			,
10. Net long-term capital gain (loss)			-
11. Net section 1231 gain (loss)			-
12. Other income (loss). List type and amount		·	-
13. Montana composite income tax paid on behalf of partner/shareholder	12	•	- .
14. Montana income tax withheld on behalf of partner/shareholder			-
Part 5 - Supplemental Information		•	-
Premiums for Insure Montana Small Business Health Insurance credit expenses	. 1		-
Film Production Credit expenses			- '
Mineral royalties tax withholding			-
4. Other information. List type and amount			-
Part 6 - Montana Tax Credits and Recapture (If Applicable)	······································		•
Insure Montana Small Business Health Insurance credit. Business FEIN	1	·····	-
Health insurance for uninsured Montanans credit (Form HI)			-
Contractor's gross receipts tax credit			-
Other credit/recapture information. List type			-

Montana Schedule K-1 (CLT-4S and PR-1) Partner's/Shareholder's Share of Income (Loss), Deductions, Credits, etc.

For the year January 1 - December 31, 2009, or tax year beginning			a	nd ending _		·
Part 1 - Pass-Through Entity Information				-		
A Entity's federal employer identification number (FEIN)			<u></u>	eck applicable t	oves.	
B Entity's name and mailing address Bridger Industrial Park, LP				Form CLT-4S Form PR-1		Amended K-1 Final K-1
1276 N 15th Ave, Suite 13	ļ.	c		Check this box		***
Bozeman, MT 59715	ľ	•	_	partnership.	11 1110 10 4	publicly traded
Part 2 - Partner/Shareholder Information						
A Partner's/shareholder's identifying number (SSN/FEIN)	D Check this	box	if pa	rtner/shareholde	r is a nonre	esident:
B Partner's/shareholder's name and mailing address	-1					ntana Form PT-AGR,
G & M Enterprises, LLC	l .					ner/shareholder
1276 N 15th Ave, Suite 103				entage of stock of	•	
Bozeman, MT 59715		31 5	perce			
	F Partner's:			2.0000	nning	Ending 2.0000000 %
	Profit			2.0000		
C What type of entity is this partner/shareholder? _Individual	Loss			2.0000		
	Capital			2.0000	000_%	, 2.000000 %
Part 3 - All Partners/Shareholders-Montana Adjustments						
A Federal Schedule K-1 income (loss) minus deductions	A.	_		9,831	Informatio	on only; see instructions.
B Montana additions to income	D.4					
1. Federally tax-exempt interest	B1	_				
2. Taxes based on income or profits	B2	. –				
3. Other additions. List type and amount	B3	^{5.} —				
C Montana subtractions from Income	04					
Interest from U.S. Treasury obligations Production for purchasing regulated material						
Deduction for purchasing recycled material						
		' <u> </u>		<u></u>		
D Multistate pass-through entities	D4				1	
1. Apportioned income. Income apportioned to Montana						on only; see instructions
2. Allocable income. Income allocated to Montana. List type are						on only; see instructions
E Total income taxable to partner/shareholder		_			intormatio	on only; see instructions
Part 4 - Nonresident Individual, Estate or Trust Beneficiary Only-Montana Source In 1. Montana apportionment percentage				2 %	Informatio	on only; see instructions
2. Ordinary business income (loss)				2 /0	imormatio	ii only, see instructions
3. Net rental real estate income (loss)						
4. Other net rental income (loss)		_		9,798		
` ,		_				
Guaranteed payments Interest income		_			•	
		_		73		
7. Ordinary dividends		_			ı	
9. Net short-term capital gain (loss)		_			•	
10. Net long-term capital gain (loss)						
11. Net section 1231 gain (loss)					•	
12. Other income (loss). List type and amount					1	
13. Montana composite income tax paid on behalf of partner/shareholder					ı	
14. Montana income tax withheld on behalf of partner/shareholder						
Part 5 - Supplemental Information		· –				
Premiums for Insure Montana Small Business Health Insurance credit expenses	1	-	-			
2. Film Production Credit expenses	۱۰ ۲	_			•	,
Mineral royalties tax withholding		· –				
4. Other information. List type and amount					•	
Part 6 - Montana Tax Credits and Recapture (If Applicable)		_			•	
Insure Montana Small Business Health Insurance credit. Business FEIN	1	_				
Health insurance for uninsured Montanans credit (Form HI)	'·	-			•	
Contractor's gross receipts tax credit					•	
4 Other credit/recapture information. List type					•	

Montana Schedule K-1

(CLT-4S and PR-1)
Partner's/Shareholder's Share of Income (Loss), Deductions, Credits, etc.

For the year January 1 - December 31, 2009, or tax year beginning			a	and ending		•
Part 1 - Pass-Through Entity Information						
A Entity's federal employer identification number (FEIN)			Chr	eck applicab	la havanı	
B Entity's name and mailing address				Form CLT-4		mended K-1
Bridger Industrial Park, LP				Form PR-1		inal K-1
1276 N 15th Ave, Suite 13	Ì	c	$\overline{}$	Check this	oox if this is a	publicly traded
Bozeman, MT 59715		•	_	partnership		
Part 2 - Partner/Shareholder Information						
A Partner's/shareholder's identifying number (SSN/FEIN)	D Check this	box	if pa	rtner/shareho	older is a nonre	esident:
B Partner's/shareholder's name and mailing address	If a nonres	sider	nt, ple	ease check th	is box if a Moi	ntana Form PT-AGR,
Lehrkind Properties, LLP	nonreside	nt ag	reer	nent has bee	n filed for partr	ner/shareholder 🚨
PO Box 10580	E Shareholde	er's	oerce	entage of stor	k ownership_	%
Bozeman, MT 59719	F Partner's:				eginning	Ending
	Profit				00000 %	
	Loss			I —	00000 %	
C What type of entity is this partner/shareholder? Individual	Capital			2.00	00000 %	
Part 3 - All Partners/Shareholders–Montana Adjustments	<u> </u>					
A Federal Schedule K-1 income (loss) minus deductions	A.			9,830	Information	n only; see instructions.
B Montana additions to income		_				.,,
1. Federally tax-exempt interest	B1					
2. Taxes based on income or profits	B2	<u>.</u> –				
3. Other additions. List type and amount	B3	3. —		·	 ,	
C Montana subtractions from Income		_				
1. Interest from U.S. Treasury obligations	C1					
Deduction for purchasing recycled material	C2	<u>.</u> –				
3. Other subtractions. List type and amount		3				
D Multistate pass-through entities						
Apportioned income. Income apportioned to Montana	D1				Information	n only; see instructions
Allocable income. Income allocated to Montana. List type a					Information	n only; see instructions
E Total income taxable to partner/shareholder	E.				Information	n only; see instructions
Part 4 - Nonresident Individual, Estate or Trust Beneficiary Only-Montana Source In						
Montana apportionment percentage				2	% Information	n only; see instructions
2. Ordinary business income (loss)						
3. Net rental real estate income (loss)				9,79	7	
4. Other net rental income (loss)						
5. Guaranteed payments		_				
6. Interest income		_		7:	3	
7. Ordinary dividends		_				
8. Royalties		_				
9. Net short-term capital gain (loss)		_				
10. Net long-term capital gain (loss)		_				
11. Net section 1231 gain (loss)						*
12. Other income (loss). List type and amount						
13. Montana composite income tax paid on behalf of partner/shareholder						
14. Montana income tax withheld on behalf of partner/shareholder	14	· _				
Part 5 - Supplemental Information		_				
1. Premiums for Insure Montana Small Business Health Insurance credit expenses						
Film Production Credit expenses		_				
3. Mineral royalties tax withholding		-			_	
4. Other information. List type and amount Part 6 - Montana Tax Credits and Recapture (If Applicable)	4.			<u> </u>	_	
• • • • • • • • • • • • • • • • • • • •	4	_				
Insure Montana Small Business Health Insurance credit. Business FEIN Health insurance for unique and Mantanana gradit (Farm III)						
Health insurance for uninsured Montanans credit (Form HI)		_				
3. Contractor's gross receipts tax credit	.,				_	

	106	35		U.S. Return	of Partners	hip Inco	ome		OMB No. 1545-0099				
	nent of the		For cale	ndar year 2009, or tax year begin ► Se	ning e separate instructi		, 20		2009				
	Revenue S	ness activity		Name of partnership	o coparato monaci.	3.101			D Employer identification number				
Rent	•	icss dollvity	Use the	Bridger Industrial Park Lp					D Employer Identification number				
B Prince	cipal produ	ct or service	label.	Number, street, and room or suit	e no. If a P.O. box, see	the instructions	i. \$ \$ \$		E Date business started				
Real	Estate		Other-	1276 N 15th Ave					01/01/1995				
C Bus	iness cod	de number	wise, print	City or town, state, and ZIP code	•	<i>*</i>	(1)		F Total assets (see the				
5311	20		or type.	Bozeman, MT 59715	£				instructions)				
								À	\$ 2,631,205				
G H		applicable		(6) Technical termination	Final return (3)	, 1	e (4) Address	change	(5) Amended return				
		_		Attach one for each person wh	T VALUE	- 100 m	/ / / / / / / /						
J ——				//-3 are attached			<u> </u>						
Caut	i <mark>on.</mark> Inci	lude only	trade or b	ousiness income and expense	es on lines 1a throug	h 22 below.	See the instruction	ns for	more information.				
	1a	Gross re	ceipts or	sales		1a							
				allowances		1b		1c					
	2	Cost of c	noods so	ld (Schedule A, line 8)		L		2					
စ္အ	3			tract line 2 from line 10				3					
Income	4			(loss) from other partnership				4					
č	5	_		V227029	ss) (attach Schedule F (Form 1040))								
_	6			om Form 4797, Part II, line 1	5 6								
	7	_	-		7								
	8			ss). Combine lines 3 throug				8					
	9							9					
(see the instructions for limitations)	1		_	es (other than to partners) (
nita	10			nents to partners				10					
ž.	11			ntenance				11					
ns fe	12							12					
읋	13			· · · · · · · · · · · ·				13	· · · · · · · · · · · · · · · · · · ·				
ıstru	14			es				14					
je j	15	Interest		· · · · · · · · · · · · ·				15					
9e t	16a		•	equired, attach Form 4562) .		16a							
	b			reported on Schedule A and e		16b		160					
ons	17	Depletio	n (Do no	t deduct oil and gas deple	tion.)			17	 				
	18	Retireme	ent plans	, etc				18					
Deducti	19			t programs				19					
ę	20	Other de	ductions	s (attach statement)				20	+				
	21			s. Add the amounts shown		ımn for line	s 9 through 20.	21					
	22			ss income (loss). Subtract				22					
Sig Hei		knowie	dge and be	f perjury, I declare that I have exami slief, it is true, correct, and complete prmation of which preparer has any	e. Declaration of prepare								
		S	ignature of	general partner or limited liability co	ompany member manag	er 7	Date						
Paid		Prepare			Dat	е	Check if	F	Preparer's SSN or PTIN				
	' oarer's	signatu					self- employed ▶						
-	Only	1 11111 3 1	name (or self-emplo	ved				EIN►					
096	Unity		s, and ZIP c					Phone	no.				

Form	1065	(2009)
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rage Z	Page	2

Sch	edule A Cost of Goods Sold (see the instr	uctio	ons)					
1	Inventory at beginning of year				1			
2	Purchases less cost of items withdrawn for personal us				2			
3	Cost of labor							
4	Additional section 263A costs (attach statement)							
5	Other costs (attach statement)				5			
6					2 A. J			
	Total. Add lines 1 through 5				<u>6</u>			
7	Inventory at end of year				7			
8	Cost of goods sold. Subtract line 7 from line 6. Enter h	ere a	nd on page 1	line 2				
9a	Check all methods used for valuing closing inventory:		- 672A <	3 3 /	$\sim ((1))$			
	(i) Cost as described in Regulations section 1.471	66550 0X 0X 0X						
	(ii) Lower of cost or market as described in Regulation			-4				
	(iii) Other (specify method used and attach explana	V 500	y	لبل بنابحي				
b	Check this box if there was a writedown of "subnormal"	' goo	ds as describ	ed in Regulation	s section 1.471-2(c)	▶		
С	Check this box if the LIFO inventory method was adopt	ed th	is tax year for	any goods (if ch	ecked, attach Form S	970) ▶		
d	Do the rules of section 263A (for property produced or	acqui	red for resale)	apply to the par	tnership?`	. 🗌 Yes		No
е	Was there any change in determining quantities, cost, of	r valu	ations betwe	en opening and	closing inventory? .	. 🔲 Yes		Vo.
	If "Yes," attach explanation.			3				
Sch	edule B Other Information	A						
1	What type of entity is filing this return? Check the ap	plica	ble box:				Yes	No
а	☐ Domestic general partnership	☑b	omestic limit	ed partnership				
С				ed liability partr	nership		125) de 1	
е	☐ Foreign partnership f		ther >		,		L-588	
2	At any time during the tax year, was any partner in	the	partnership a			(including	American de La company	
	an entity treated as a partnership), a trust, an S corp						1	
	or a nominee or similar person?			(0111011110111011101111			*	
3	At the end of the tax year:						100	0.13/2.1
	-	(:	-ll:					
а	Did any foreign or domestic corporation, partnershi exempt organization own, directly or indirectly, an	p (ini	cluding any e	entity treated as	s a partnersnip), tru	St, or tax-	6 A. S.	لــــا
	partnership? For rules of constructive ownership, s							,
	Partners Owning 50% or More of the Partnership	CC 111	Suucuons. II	res, allacir	schedule b-1, inion	nauon on		∀
L		۰		· · · · · ·				
b	Did any individual or estate own, directly or indirect the partnership? For rules of constructive ownershi							,
	on Partners Owning 50% or More of the Partnership		e manuchors	5. 11 165, alla	cii ociiedule b-1, ii	normation		•
		•					Talk Carde Same	
4	At the end of the tax year, did the partnership:	. مالحم	E00/			.1		
а	Own directly 20% or more, or own, directly or indirectly stock entitled to vote of any foreign or domes	ecuy	, 50% or mo	re of the total	voting power of all	classes of		
						snip, see		
	instructions. If "Yes," complete (i) through (iv) below	<u> </u>				· · ·	<u> </u>	✓
	(i) Name of Corporation			r Identification er (if any)	(iii) Country of Incorporation	(iv) Perc Owned in		
				(,,,,)		Sto	ck	
•	0 " " 1		<u> </u>				rit a sa	gent angle B
b	Own directly an interest of 20% or more, or own, dir	ectly	or indirectly,	an interest of 5	0% or more in the p	rofit, loss,		
	or capital in any foreign or domestic partnership (in	cludi	ng an entity	treated as a pa	artnership) or in the	beneficial		لـــا
	interest of a trust? For rules of constructive ownershi						<u>L. </u>	✓_
	(i) Name of Entity		i) Employer dentification	(iii) Type of	(iv) Country of Organization	(v) M Percenta	laximun qe Owr	
			ımber (if any)	Entity	Organization	Profit, Lo		

orm 10	65 (2009)	F	age
_		Yes	N
5	Did the partnership file Form 8893, Election of Partnership Level Tax Treatment, or an election statement under section 6231(a)(1)(B)(ii) for partnership-level tax treatment, that is in effect for this tax year? See Form 8893 for more details		,
6	Does the partnership satisfy all four of the following conditions?		*
а	The partnership's total receipts for the tax year were less than \$250,000.		
C	The partnership's total assets at the end of the tax year were less than \$1 million. Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.		
d	The partnership is not filing and is not required to file Schedule M-3		✓
7	Is this partnership a publicly traded partnership as defined in section 469(k)(2)?		1
8	During the tax year, did the partnership have any debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?		▼
9	Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?		1
10	At any time during calendar year 2009, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country.		
11	At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions		1
l2a	Is the partnership making, or had it previously made (and not revoked), a section 754 election?	- 650, Toroni	✓
b	Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions		1
C-	Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions.		/
13	Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than entities wholly-owned by the partnership throughout the tax year)		
4	At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		1
5	If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign Disregarded Entities, enter the number of Forms 8858 attached. See instructions ▶		
6	Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership. ▶		7
7	Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return. ▶		

Name of	\	
designated	Identifying	,
TMP	number of TMP	
If the TMP is an	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
entity, name	Phone number	
of TMP representative	of TMP	
Address of \		
designated		
With a sign of the		

Sched	ule K	Partners' Distributive Share Items		Total amount
	1	Ordinary business income (loss) (page 1, line 22)	1	
	2	Net rental real estate income (loss) (attach Form 8825)	2	489,880
	3a	Other gross rental income (loss)		
	ь	Expenses from other rental activities (attach statement) . 3b		
	С	Other net rental income (loss). Subtract line 3b from line 3a	3с	
ŝ	4	Guaranteed payments	4	
SO	5	Interest income	5	3,640
7	6	Dividends: a Ordinary dividends	6a	
Ĕ		b Qualified dividends	7 (3.48)	
Income (Loss)	7	Royalties	7	
<u>=</u>	8	Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8	
	9a	Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a	
	b	Collectibles (28%) gain (loss)		
	С	Unrecaptured section 1250 gain (attach statement) 9c		
	10	Net section 1231 gain (loss) (attach Form 4797)	10	
	11	Other income (loss) (see instructions) Type	11	
ટા	12	Section 179 deduction (attach Form 4562)	12	
<u>.</u> <u>ō</u>	13a	Contributions	13a	2,000
걸	b	Investment interest expense	13b	7000
Deductions	С		13c(2)	
	d	Other deductions (see instructions) Type ▶	13d	
Self- Employ- ment	14a	Net earnings (loss) from self-employment	14a	
를 를 들	b	Gross farming or fishing income	14b	
<u>wm</u> E	C	Gross nonfarm income	14c	
	15a	Low-income housing credit (section 42(j)(5))	15a	
ţ	b	Low-income housing credit (other)	15b	
Credits	C	Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	15c	
ວັ	d	Other rental real estate credits (see instructions)	15d	
	e	Other rental credits (see instructions)	15e	
	16a	Other credits (see instructions) Name of country or LLS, possession	15f	
	b	Name of country or U.S. possession ►	401	ľ
ns L	C	Gross income from all sources	16b	
<u>ģ</u>		Foreign gross income sourced at partnership level	16c	
Transactions	d	Passive category ► e General category ► f Other ►	16f	
ıns	_	Deductions allocated and apportioned at partner level	101	
<u> </u>	q	Interest expense ► h Other	16h	
_		Deductions allocated and apportioned at partnership level to foreign source income	.0	
ej <u>o</u>	i	Passive category ► j General category ► k Other ►	16k	
Foreigr	1	Total foreign taxes (check one): ▶ Paid ☐ Accrued ☐ · · · · · · · ·	161	
	m	Reduction in taxes available for credit (attach statement)	16m	
	n	Other foreign tax information (attach statement)		
Alternative Minimum Tax (AMT) Items	17a	Post-1986 depreciation adjustment	17a	2,929
e ii ii	b	Adjusted gain or loss	17b	
te Hai	С	Depletion (other than oil and gas)	17c	
ËĒE	d	Oil, gas, and geothermal properties—gross income	17d	
A in the	е	Oil, gas, and geothermal properties—deductions	17e	
<u> </u>		Other AMT items (attach statement)	17f	
ü	18a	Tax-exempt interest income	18a	
Other Information	b	Other tax-exempt income	18b	
Ĕ	C	Nondeductible expenses	18c	22,872
Į.	19a	Distributions of cash and marketable securities	19a	205,000
ř	b	Distributions of other property	19b	
hei	20a	Investment income	20a	3,640
₹	b	Investment expenses	20b	[]
	С	Other items and amounts (attach statement)		1.00

Analy	sis of Net Incon	ne (Loss)							
1		. Combine Schedule 12 through 13d, and					sult, subtract th	e sum of	
2	Analysis by partner type:	(i) Corporate	(ii) Indiv	/idual	(iii) Indiv (passiv	idual	(iv) Partnersh	(v) Evennt	(vi) Nominee/Other
а	General partners						19,	661	
b	Limited partners			471,859			EC 24		
Sche	edule L Ba	lance Sheets per	Books		Beginnin	g of tax	year 💛 🕖	End of t	ax year
		Assets			(a)	K	(b)	(c)	(d)
1	Cash					Lo	37,529		0
2a	Trade notes and a	accounts receivable	"	a 🗛 🗸	26,79	2		48,310	
b	Less allowance for	or bad debts	(V.		26,792		48,310
3	Inventories								
4	U.S. government	obligations	. <i>(</i> 7,3)			160			
5	Tax-exempt secu	rities .	7.70	22 - 34	TELS:				
6	Other current ass	ets (attach statemen	t) . 🟸				275,872		301,872
7	Mortgage and rea	al estate loàns	.V		faite (13	U-		
8	Other investments	s (attach statement)							
9a	Buildings and oth	er depreciable asset	s . 🔑	A A	/ 3,265,83	386.5.53		3,275,566	
b	Less accumulated	6.0	· . W./A		90,81	2	2,359,021	944,543	2,281,023
10a	Depletable assets		13/61						
þ	Less accumulated	V- 310	· /-/ . Will		55 Tar 40 Section 2010 177 177 17				
11	Land (net of any a		9 .						
12a	-	(amortizable only)			9,52			8-10-AL-ABA	
b	Less accumulated				7,68	3	1,845		
13	Other assets (atta	•		1511		(4) (4)	2 704 050		0.004.005
14	Total assets	es and Capital					2,701,059		2,631,205
15				45.4			149		0.543
15 16		9			araz da e		188,199		9,543 180,516
17		oonds payable in less tl vilities (<i>attach statem</i> e	-	211	tille:		15,877		180,516
18		oans	•				13,077		
19		bonds payable in 1 yea					621,712		256,139
20		ttach statement) .					59,180		92,799
21	Partners' capital	· ·			12171		1,815,942		2,092,208
22	Total liabilities an					1	2,701,059		2,631,205
Sch	edule M-1	Reconciliation of I	ncome (Loss) pe	er Books	With	Income (Los	s) per Return	
	N	lote. Schedule M-3	may be re	quired ins	stead of So	chedul	e M-1 (see inst	ructions).	
1	Net income (loss)	per books		481,2	66 6	Income	recorded on book	s this year not included	
2	Income included on	Schedule K, lines 1, 2, 3	ic,			on Sche	edule K, lines 1 thro	ough 11 (itemize):	
		and 11, not recorded			a	Tax-ex	cempt interest \$	5	
		nize):			┙.			12,618	12,618
3		yments (other tha						on Schedule K, lines	
)						l 16l, not charged this year (itemize):	1
4		ed on books this ye Schedule K, lines							
	through 13d, and		'		а	Debie	Ciation \$		-
а	- •				- } -				
b	Travel and enterts	ainment \$			8				12,618
_	Traver and emeric	22,87	2	22,8	1			sis of Net Income	
5	Add lines 1 through	gh 4	-	22,0				t line 8 from line 5 .	491,520
	edule M-2 A	nalysis of Partne	rs' Capit	al Acco		/1	, = ===		451,020
1	······	ning of year		1,815,9		Distrih	utions: a Cash	·	205,000
2		ed: a Cash			-			erty	
		b Property .			7	Other	decreases (iten	nize):	
3	Net income (loss)	per books	.	481,2					
4	Other increases (i	itemize):							
			ı		8				
5		gh 4		2,297,2				ubtract line 8 from line 5	

Form **8825**

Department of the Treasury

Internal Revenue Service

Rental Real Estate Income and Expenses of a Partnership or an S Corporation

See instructions on back

► See instructions on back.

► Attach to Form 1065, Form 1065-B, or Form 1120S.

OMB No. 1545-1186

Employer identification number **BRIDGER INDUSTRIAL PARK LP** Show the kind and location of each property. See page 2 to list additional properties. COMMERCIAL BUILDING BOZEMAN, MT _____ В ------**Properties** Α С D Rental Real Estate Income 2 831,856 Gross rents 2 Rental Real Estate Expenses 3 3 Advertising 4 Auto and travel 4 5 Cleaning and maintenance . 15,256 6 Commissions 24,854 7 7 Insurance 1,120 8 Legal and other professional fees 18,303 9 9 Interest 21,711 10 Repairs 10 11 48,141 11 Taxes 608 12 Utilities , 12 13 13 Wages and salaries 87,731 14 14 Depreciation (see instructions) 124,252 Other (list) ► STMT 11 15 15 Total expenses for each property. 341,976 16 Add lines 3 through 15 831,856 17 Total gross rents. Add gross rents from line 2, columns A through H 17 341,976 18 Total expenses. Add total expenses from line 16, columns A through H 18 19 Net gain (loss) from Form 4797, Part II, line 17, from the disposition of property from rental real 19 20a Net income (loss) from rental real estate activities from partnerships, estates, and trusts in which 20a this partnership or S corporation is a partner or beneficiary (from Schedule K-1) b Identify below the partnerships, estates, or trusts from which net income (loss) is shown on line 20a. Attach a schedule if more space is needed: (1) Name (2) Employer identification number 489,880 Net rental real estate income (loss). Combine lines 17 through 20a. Enter the result here and on: • Form 1065 or 1120S: Schedule K, line 2, or • Form 1065-B: Part I, line 4

3	Advertising	3				
4	Auto and travel	4				
5	Cleaning and maintenance	5				
6	Commissions	6				
7	Insurance	7				
8	Legal and other professional fees	8				
9	Interest	9				
10	Repairs	10				
11	11 Taxes	11				
12		12				
13		13				
14	Depreciation (see instructions)	14				
15	Other (list) ▶					
		15				
		10				
16	Total expenses for each property.					
	Add lines 3 through 15	16				L
			 		facilities of the first facilities of	

Instructions

Section references are to the Internal Revenue Code.

What's New

The IRS will revise this December 2006 version of Form 8825 only when necessary. Continue to use this version of the form for tax years beginning after 2006 until a new revision is issued.

Purpose of form. Partnerships and S corporations use Form 8825 to report income and deductible expenses from rental real estate activities, including net income (loss) from rental real estate activities that flow through from partnerships, estates, or trusts.

Before completing this form, be sure to read:

- Passive Activity Limitations in the instructions for Form 1065 or Form 1120S, or Passive Loss Limitation Activities in the instructions for Form 1065-B, especially for the definition of "rental activity."
- Extraterritorial Income Exclusion in the instructions for Form 1065, 1065-B, or 1120S.

Specific Instructions. Form 8825 provides space for up to eight properties. If there are more than eight properties, attach additional Forms 8825.

The number of columns to be used for reporting income and expenses on this form may differ from the number of rental real estate activities the partnership or S corporation has for purposes of the passive activity limitations. For example, a partnership owns two apartment buildings, each located in a different city. For purposes of the passive activity limitations, the partnership grouped both buildings into a single activity. Although the partnership has only one rental real estate activity for purposes of the

passive activity limitations, it must report the income and deductions for each building in separate columns.

However, if the partnership or S corporation has more than one rental real estate activity for purposes of the passive activity limitations, attach a statement to Schedule K that reports the net income (loss) for each separate activity. Also, attach a statement to each Schedule K-1 that reports each partner's or shareholder's share of the net income (loss) by separate activity (except for limited partners in an electing large partnership). See *Passive Activity Reporting Requirements* in the instructions for Form 1065, Form 1065-B, or Form 1120S for additional information that must be provided for each activity.

Complete lines 1 through 16 for each property. But complete lines 17 through 21 on only one Form 8825. The figures on lines 17 and 18 should be the combined totals for all forms.

Do not report on Form 8825 any:

- Income or deductions from a trade or business activity or a rental activity other than rental real estate. These items are reported elsewhere.
- Portfolio income or deductions.
- · Section 179 expense deduction.
- Other items that must be reported separately to the partners or shareholders.
- Commercial revitalization deductions.

Line 1. Show the kind of property rented out (for example, "apartment building"). Give the street address, city or town, and state.

Line 14. The partnership or S corporation may claim a depreciation deduction each year for

rental property (except for land, which is not depreciable). If the partnership or S corporation placed property in service during the current tax year or claimed depreciation on any vehicle or other listed property, complete and attach Form 4562, Depreciation and Amortization. See Form 4562 and its instructions to figure the depreciation deduction.

Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws and to allow us to figure and collect the right amount of tax.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time is: Recordkeeping, 6 hr., 27 min.; Learning about the law or the form, 34 min.; Preparing the form, 1 hr., 37 min.; Copying, assembling, and sending the form to the IRS, 16 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making this form simpler, we would be happy to hear from you. See the instructions for the tax return with which this form is filed.

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

OMB No. 1545-0172

Attachment Sequence No. 67

Name(s) shown on return

Business or activity to which this form relates

Identifying number BRIDGER INDUSTRIAL PARK LP COMMERCIAL BUILDING **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount. See the instructions for a higher limit for certain businesses \$250,000 1 2 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 \$800,000 Reduction in limitation. Subtract line 3 from line 2 If zero or less enter -0-... 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-, If married filing separately, see instructions 1. 1. (a) Description of property (c) Elected cost (b) Cost (business use only) 6 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12 ▶ Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 Property subject to section 168(f)(1) election . 15 16 Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Do not include listed property.) (See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2009 87,367 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction only-see instructions) service 19a 3-year property b 5-year property c 7-year property 1,210 7.0 HY 200DB 173 d 10-year property e 15-year property f 20-year property 25-year property 25 yrs. S/L h Residential rental 27.5 yrs. MM S/L property 27.5 yrs. ММ S/L ¡ Nonresidential real 2/15 8,524 39 yrs. ММ S/L 191 property ММ S/L Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs. S/L c 40-year 40 yrs. MM S/L Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28

22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here

and on the appropriate lines of your return. Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs

87,731

Form	4562 (2009)														Page Z
	rt V Listed	Property (Ir							es, cel	lular te	lephoi	nes, c	ertain co	omputer	
		For any vehicle plumns (a) throu										ве ехре	ense, com	plete o i	1ly 24a,
		-Depreciation a										passen	ger autor	nobiles.)	
24a		ence to support the						s 🗌 No					e written?	☐ Yes	□ No
Тур	(a) ne of property (list vehicles first)	(b) Date placed in ir service	(c) Business/ nvestment use percentage	Cost or	(d) other ba		e) sis for de usiness/ir use o	preciatio vestmen	n Rec	n overy iod	(g) Method Convent		(h) Depreciation deduction		(i) d section 9 cost
25		ciation allowand used more than								the	$[\hat{\mathbb{D}}]_{\mathcal{A}}$	25			
26	Property used	more than 50%	6 in a qual	ified bu	isin ess	use:	CF	·		17/5	19 4				
			%			4		,	- 4	175	<u>J</u> j_				
			% - %	1 A			A-10257A A.	g of	1) /	3) 			······································		
27	Property used	50% or less in			ess use	:		1.7	12	1				K 27 - 27 ***	
			<u>\</u> \%					} \	4		<u>L – </u>				
			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		- 8	₹/ }	\sim	1	-		L – L –			-	
28	Add amounts	in column (h), liı			7. Enter	here a	nd on l	ne 21.	page 1			28		-	
29		in column (i), lin	25 20.	VICTOR VICTOR	- Tourist 100	88.			-		·			29	<u> </u>
		n for vehicles use	ed by a sol	è propri	etor, pa	rtner, oi	r other "	more th		wner," c					/ehicles
to yo	our employees, fi	rst answer the qu	uestions in	Section	C to se	e if you	meet a	n excep	otion to o	completin	ng this s	section	for those	vehicles.	
30		/investment mile /ear (do not ·s)	include		a) cle 1 		b) icle 2		(c) icle 3	(d Vehic			(e) hicle 5	(f	
	Total commuting Total other p	miles driven during	g the year mmuting)												
33		ven during the y	ear. Add												
34		le available for		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35		ole used primar owner or related													
36	_	cle available for p													
_		Section C—C								-			-		
	•	tions to determi ers or related pe	-		•		comple	ting Se	ction B	for vehi	cles us	ed by e	employee	s who ar	e not
37	Do you mainta	ain a written pol					person	al use o	of vehicl	es, inclu	iding c	ommut	ting, by	Yes	No
38		es? ain a written po see the instructio										_	 by your		
39	• •	Il use of vehicle			•	•		o, unco	.0.0, 01	70 01 111	ore own				-
40	Do you provid	le more than fivicles, and retain	e vehicles	to you	r emplo	oyees, o		nforma	tion froi	n your e	employ	ees ab	out the		
41	Do you meet t	the requirement answer to 37, 38,	s concern	ing qua	dified a	utomok									100
Pa		tization	03, 40, 01	4113 1	63, 00	not co	inpiete (Jection	ם וטו נוו	e covere	u verno	103.		3 3	
υu	Amor	tization.	1 (b)							1	(e)	-		
	(a) Description	of costs	Date am	ortization gins	,		(c) ble amour	nt		d) section	pe	ortization eriod or centage	1	(f) zation for t	his year
42	Amortization of	f costs that begi	ns during y	our 200	9 tax y	ear (see	instruc	tions):							
			1		-										
12	Amortization	of coets that ha	gan hofor	2 1/01 17	2000 +0	v 1/00°						1 4	3		
		of costs that beg mounts in colum	-	-		-		report				4:			
			,.,. 500	// 10		77			<u> </u>		<u> </u>		 		

• · · · · · · · · · · · · · · · · · · ·		
SCHEDULE K NET INCOME (LOSS) FROM	M RENTAL REAL ESTATE STATEMENT	1
DESCRIPTION	TOUNT	
COMMERCIAL BUILDING	489,88	0.
TOTAL TO SCHEDULE K, LINE 2	489,88	0.
SCHEDULE K INTEREST	INCOME STATEMENT	2
DESCRIPTION	U.S. BONDS OTHER	
FINANCE CHARGE INCOME	3,64	0.
FOTAL TO SCHEDULE K, LINE 5	3,64	0.
SCHEDULE K CHARITABLE CO	ONTRIBUTIONS STATEMENT	3
DESCRIPTION	TYPE AMOUNT	
Cash	CASH (50%) 2,00	0.
FOTALS TO SCHEDULE K, LINE 13A	2,00	0.
SCHEDULE K NONDEDUCTIBI	LE EXPENSE STATEMENT	4
DESCRIPTION	AMOUNT	
LIFE INSURANCE	22,87	2
TOTAL TO SCHEDULE K, LINE 18C	22,87	2
SCHEDULE K OTHER	ITEMS STATEMENT	
DESCRIPTION	AMOUNT	
FED ESTIMATED TAX PYMT-12/21/2007 MT ESTIMATED TAX PYMT-12/21/2007 FED ESTIMATED TAX PYMT-12/21/2007 MT ESTIMATED TAX PYMT-12/21/2007 FED ESTIMATED TAX PYMT-12/21/2007 MT ESTIMATED TAX PYMT-12/21/2007	3,50 60 87,50 15,00 28,00 4,80	0 0 0 0 0 0 0 0

STATEMENT(S) 1, 2, 3, 4,

						_
DDD DAMENUMBD MAY DIGAM 10	/01 /0007				14,0	nη
FED ESTIMATED TAX PYMT-12						
MT ESTIMATED TAX PYMT-12/					2,4	
FED ESTIMATED TAX PYMT-12	/21/2007				14,0	
MT ESTIMATED TAX PYMT-12/	21/2007				2,4	00
FED ESTIMATED TAX PYMT-12					14,0	00
MT ESTIMATED TAX PYMT-12/					2,4	
					14,0	
FED ESTIMATED TAX PYMT-12					4,8	
MT ESTIMATED TAX PYMT-12/	21/2007				4,0	00
SCHEDULE L	OTHER	CURRENT A	SSETS		STATEMENT	(
	i t			BEGINNING OF	END OF TAX	K
DESCRIPTION	Α,			TAX YEAR	YEAR	
DUE FROM BELGRADE CASINO				8,000.	8,0	
DUE FROM C-L AIRPORT ROAD				10,000.	18,0	
DUE FROM COUGAR PARK				25,182.	25,18	32
DUE FROM SHEDHORN		•		232,690.	232,69	90
DUE FROM C-L INVESTMENTS				0.	18,00	
TOTAL TO SCHEDULE L, LINE	6		•	275,872.	301,8	72
SCHEDULE L	OTHER C	URRENT LIA	BILITI	ES	STATEMENT	,
DESCRIPTION		٠.		BEGINNING OF TAX YEAR	END OF TAX	K
PREPAID RENTS			•	15,877.		0
TOTAL TO SCHEDULE L, LINE	17			15,877.		0
SCHEDULE L	ОТН	ER LIABILI	TIES		STATEMENT	
		•		BEGINNING OF	END OF TA	X
DESCRIPTION			•	BEGINNING OF TAX YEAR	END OF TA	X
				TAX YEAR	YEAR	
SECURITY DEPOSITS					YEAR 66,0	35
SECURITY DEPOSITS DUE TO GENE COOK				TAX YEAR	YEAR 66,0 11,0	35 59
DESCRIPTION SECURITY DEPOSITS DUE TO GENE COOK DUE TO BELGRADE COMMERCIA	L PROP			TAX YEAR	YEAR 66,0	35 59
SECURITY DEPOSITS DUE TO GENE COOK				TAX YEAR	YEAR 66,0 11,0	35 59 05

SCHEDULE M-1 EXPENSES RECORDED ON BOOKS NOT DEDUCTED IN RETURN	STATEMENT	9
DESCRIPTION	AMOUNT	
LIFE INSURANCE	22,87	2.
TOTAL TO SCHEDULE M-1, LINE 4	22,87	2.
SCHEDULE M-1 INCOME RECORDED ON BOOKS NOT INCLUDED ON RETURN	STATEMENT	10
DESCRIPTION	AMOUNT	
ACCRUAL TO CASH CONVERSION	12,61	.8.
TOTAL TO SCHEDULE M-1, LINE 6	12,61	8 .
OTHER RENTAL EXPENSES	STATEMENT	11
PROPERTY: COMMERCIAL BUILDING		
BOZEMAN, MT DESCRIPTION	TMUOMA	
AMORTIZATION	1,74	
BANK CHARGES	17	
COMMON AREA COSTS	29,31	
MANAGEMENT FEES	57,90 14	
SUPPLIES RENTS - REAL PROPERTY	34,96	
OUTSIDE SERVICES POSTAGE EQUIPMENT RENT		8

				[Final K-	1	Amended	1 K-1	OMB No. 1545-0099
Sch	edule K-1		<u> </u>	Pa	rt III	Partner'	s Share o	f Cur	rrent Year Income,
(For	m 1065)		2009			The Control of the Co	A 100 A 100 A 100 A		and Other Items
Depar	tment of the Treasury	For calendar	r year 2009, or tax	1		business inco		r i	Credits
	al Revenue Service		•		·	540,7,000 1110	∠ O.		3
			ing, 2009 , 20	2	Net renta	l roal ostato i	income (loss)	-	ş
_				-	INCLIONA	، ۱۳۵۱ اتا	235,143.		
	tner's Share of Inc	come, Deduct	tions,	3	Other net	t rental incon	7 70.07	16	Foreign transactions
Cre	dits, etc.	► See back of form a	and separate instructions.	"	Onler ne	l rentar incon	10 (IOSS)	10	Foreign transactions
	art I Information	Ahaut tha Darti	nership	.	420mm				\$
			nersnip	4	Guarame	ed payments	· d		
Α	Partnership's employer identi	fication number		2		<u> </u>	- (X	P\$4	e describer de la company de l
ļ			— <i>4</i> 4,—	(5′)	Înterest i	ncome	W77	[A]	
В	Partnership's name, address,	city, state, and ZIP co	abc Jack	Cy			1,747.		
	ger industrial Park LP			6a	Ordinary	dividends			
	N 15th Ave, Suite 103	. 6		<u> </u>	a 45	11/7/			
BOZE	eman, MT 59715			6b	Qualified	dividends	¥		
		V (#) ?			14	الرسمان			\$
				7	Royalties) Pare	ļ		:
С	IRS Center where partnership	ofiled return							
Ogd	en, UT	~	AY N GOL	8	Net short	t-term capita	l gain (loss)		
D	Check if this is a publicly	traded partnership (P	TP) (L	<i>i</i> .
			A W W AP	9a	Net long	-term capital	gain (loss)	17	Alternative minimum tax (AMT) items
P	art II Information	About the Parti	ner , , , , , , , , , , , , , , , , , , ,		: :	<u> </u>		Α	1,406.
E	Partner's identifying number			9b	Collectib	les (28%) ga	in (loss)		
	<u> </u>		4 <i>38</i> 7						
F	Partner's name, address, city	. state, and ZIP code		9с	Unrecap	tured section	1250 gain		
 Gen	e Cook						ļ		
	N 15th Ave, Suite 103			10	Net secti	on 1231 gair	ı (loss)	18	Tax-exempt income and
	eman, MT 59715				:	-	•		nondeductible expenses
				11	Other inc	come (loss)		C*	10,978.
				ŀ		•		**************************************	TO THE RESIDENCE AND AND AND A STATE OF THE
G	General partner or LLC	✓ Limited	partner or other LLC	1		-,	Committee of the commit	1	THE PROPERTY AND A STATE OF TH
	member-manager	membe			; }			COMMET CONTRACTOR CONTRACTOR	of the second control
Н	✓ Domestic partner	Foreign	n partner		{	······································	THE STREET WASHINGTON AND THE OF BEING		- management
	•	_ •	•	1	i			19	Distributions
l.	What type of entity is this par	tner? Individual		12	Section	179 deductio	n	A	98,400.
]	Partner's share of profit, loss		rictions).		1				
	Beginning	, and oupital (occ most	Ending	13	Other de	ductions		1	TOTAL LANGE
	Profit 48.0	0000000 %	48.0000000 %	A			960.	20	Other information
	40.0	0000000 %	48.0000000 %		THE TAXABLE ASSESSMENT OF THE PARTY.	ti diller oʻrti oʻro di Matthew Shiller Angheiginga			
1		0000000 %	48.0000000 %		1			A	1,747.
	Capital 40.0	700000 %]	40.000000 %	-	demonstration of the second	. // /	F-174		
١,	Dortoor's obors of liabilities of	busan and			t .			W*	STMT
K	Partner's share of liabilities at Nonrecourse			14	Self-emr	oloyment ear	ninge (loee)	-	
1	Qualified nonrecourse financi	· 		A		noyment ean	0.	1	
	Recourse		269,499			or or account the accompany		p	
	Recourse	»	209,499						
\vdash				+0.				<u> </u>	1
L	Partner's capital account and	•	000 000	-Se	e attacr	ied staten	ient for add	itiona	al information.
	Beginning capital account .			1					
	Capital contributed during the								
	Current year increase (decrea								
	Withdrawals & distributions		98,400.)	For IRS Use Only					
	Ending capital account	\$	1,001,531.	l e					
	m . m .			۱ő					
	✓ Tax basis ☐ G	AAP L Secti	ion 704(b) book	RS.					
l	Other (explain)		•	<u> </u>					
1				l R					
М	Did the partner contribute pro		jain or loss?						
	∐ Yes ☐ N	0							
1	If "Yes", attach statemer	nt (see instructions)		1					

SCHEDULE K-1	NONDEDUCTIBLE EXPENSES, BOX 18, CODE C	-
DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
LIFE INSURANCE		10,978
TOTAL TO SCHEDULE K-	1, BOX 18, CODE C	10,978
SCHEDULE K-1	OTHER INFORMATION, BOX 20, CODE W	
SCHEDULE K-1		AMOUNT
	OTHER INFORMATION, BOX 20, CODE W	AMOUNT 87,500

				l l	Final K	1 Amende	ea K-1	OMB No. 1545-0099
	edule K-1 m 1065)		2009	Pa	irt III			rrent Year Income,
Depar	tment of the Treasury	For calendar y	ear 2009, or tax	1	Ordinary	business income (loss)	15	Credits
ntern	al Revenue Service	vear beginning	9, 2009			<i>a</i> 0		
		ending _	, 20	2	Net rent	al real estate income (loss)	1	< · · · · · · · · · · · · · · · · · · ·
Par	tner's Share of Inco	ome, Deducti	ions,	<u> </u>	V.2	78,380	+	
Cre	dits, etc. ▶	See back of form ar	nd separate instructions.	3	Other ne	et rental income (loss)	16	Foreign transactions
P	art I Information A	bout the Partn	ership	4	Guarant	eed payments		
Α	Partnership's employer identific	cation number				9) (4	18	3
				(5)	Interest	income 582	1/	
В	Partnership's name, address, c	ity, state, and ZIP coc	de veril			Andread from the state of the s	40/	·
1276	ger industrial Park LP S N 15th Ave, Suite 103	48		6a	Ordinary	y dividends		
Boze	eman, MT 59715			6b	Qualifie	d dividends		*
		// 10 <u>k</u>		7	Royaltie	S	ŀ	
С	IRS Center where partnership f	iled return	4 /8		1) 12			-
Ogd	en, UT			8	Net sho	rt-term capital gain (loss)		1
D	Check if this is a publicly tr	raded partnership (PTI	P) () _ M	1				4
		17-	A STAN B	9a	Net lond	q-term capital gain (loss)	17	Alternative minimum tax (AMT) items
ВΡ	art II Information A	bout the Partn	er				A	469.
E	Partner's identifying number	No.	y	9b	Collecti	bles (28%) gain (loss)	-	
F	Partner's name, address, city,	state, and ZIP code		9с	Unreca	otured section 1250 gain		A Company of the Comp
Carl	Lehrkind, IV				\$			>
	Box 10580			10	Net sec	tion 1231 gain (loss)	18	Tax-exempt income and
Boz	eman, MT 59719-0580				ł			nondeductible expenses
				11	Other in	come (loss)	C*	3,660.
G	General partner or LLC	Limited p	partner or other LLC					
	member-manager	member						
Н	✓ Domestic partner	☐ Foreign p	partner		-	Control of the Contro		
	•			İ			19	Distributions
ı	What type of entity is this partn	er? Individual		12	Section	179 deduction	- A	32,800.
J	Partner's share of profit, loss, a		otional:					
	Beginning	ina capitai (see instrut	Ending	13	Other d	eductions	1	
	• •	000000 %	16.0000000 %	A	Ouici d	320	. 20	Other information
				***************************************	on province security of the se			Other information
i		000000 %	16.0000000 %	1	1		Α	582.
	Capital 16.000	000000 %	16.0000000 %		-			· of the control of t
							W*	STMT
K	Partner's share of liabilities at y			<u> </u>	0 16			
	Nonrecourse	·		14	Self-em	ployment earnings (loss)		
	Qualified nonrecourse financing			A	÷	······································		
	Recourse	\$	0.		1			-
				<u> </u>				
L	Partner's capital account analy			*Se	e attac	hed statement for ac	dition	al information.
	Beginning capital account .	\$	290,724.					
	Capital contributed during the	year \$						
	Current year increase (decrease			١.				
	Withdrawals & distributions	\$ (32,800 _{·)}	<u>E</u>				
	Ending capital account	\$	334,925.	0				
	_			l S				
	☑ Tax basis ☐ GA	AP Section	n 704(b) book	For IRS Use Only				
	Other (explain)			=				
				Ē				
М	Did the partner contribute prop		in or loss?					
	∐ Yes ☐ No							
	If "Yes", attach statement	(see instructions)						

SCHEDULE K-1 NON	DEDUCTIBLE EXPENSES, BOX 18, CODE C	
DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
LIFE INSURANCE		3,660.
TOTAL TO SCHEDULE K-1, B	OX 18, CODE C	3,660.
SCHEDULE K-1	OTHER INFORMATION, BOX 20, CODE W	
DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
FED ESTIMATED TAX		28,000
MT ESTIMATED TAX		4,800

				Final K		Amended		OMB No. 1545-0099
Schedule K-1		2009	Pa	rt III	Partner's	Share o	f Cui	rrent Year Income,
(Form 1065)		<u> </u>			Deduction	ns, Cred	its, a	nd Other Items
Department of the Treasury	For calendar	year 2009, or tax	1	Ordinary	business incon	ne (loss)	15	Credits
Internal Revenue Service	year beginni	ng, 2009	ł		,	🥠 0.		
		, 20	2	Net renta	al real estate in	ome (loss)	MA.A. 1 P	
Partner's Share of					مرابعة المرابعة المرابعة المرابعة ا	√39,191.		? }
	•	·	3	Other ne	t rental income	(loss)	16	Foreign transactions
Credits, etc.	See back of form a	and separate instructions.		-75		7		-
Part I Information	on About the Parti	nership	4	Guarante	eed payments		~~.	\$
A Partnership's employer id		The state of the s	\bigcirc)	(0)	1	> :
Turking a amployor k	John Marine	A .	/5	Înterest	income /	ベントミ	ZXS	
B Partnership's name, add	ress, city, state, and ZIP co	ode AA	$(\ \)$			291.		**
Bridger industrial Park LP		, de	6a	Ordinary	dividends			
1276 N 15th Ave, Suite 103				.6	9171			
Bozeman, MT 59715			6b	Qualified	dividends)		
			E)		Ho -			*
			7.	Royaltie	Swan			
C IRS Center where partne	rehin filed return	<u>€ √√3</u>		[] U				:
Ogden, UT	TSTIP ITEC TELUTI	2 2 2 X	8	Net sho	t-term capital o	ain (loss)		\$=====================================
	olicly traded partnership (P	TD)	1	, , , , , , , , , , , , , , , , , , , ,		, ()		
D Check if this is a put	niciy traded partifership (r		9a	Net long	-term capital g	ain (loss)	17	Alternative minimum tax (AMT) items
Part II Information	on About the Part	ner	1 30	, rections	r term oupitur g	ani (1033)	A	234.
	<u> </u>		9b	Collectit	oles (28%) gain	(loss)		3
E Partner's identifying num	iber		"	Collectiv	nes (2070) gain	(1033)		
	1.710		9c	Unrecar	tured section 1	250 gain		
· ·	, city, state, and ZIP code		"	Officeap	nuieu section i	200 gain		
Lori Filippini 308 Price Road			10	Not post	tion 1231 gain (local	18	Tax-exempt income and
Three Forks, MT 59752			"	Net Seci	uon 1231 gain (1055)	'8	nondeductible expenses
			11	Other in	come (loss)		C*	4 020
			l ''	Other	come (loss)			1,830.
			harrow manus		program i rigi e selve i i granda nagangangan i i i gan anna ana	and the second s		or constant
G ☐ General partner or L member-manager	LC Limited membe	partner or other LLC	1					
1 _			ļ	-		***************************************		Tool Day
H ✓ Domestic partner	☐ Foreign	partner		-			19	Distributions
What type of entity is this	Individual		12	Section	179 deduction		A	16,400.
1 "	•		'-	Section	179 deduction			70,400.
J Partner's share of profit, Beginni	loss, and capital (see instri	uctions): Ending	13	Othor d	eductions			r alama (PP)
1	· .	-	A	Other de	eductions	160.		Other information
Profit	8.00000000 %	8.0000000 %	1	-	Mary and the state of the state	100.	20	Other information
Loss	8.00000000 %	8.0000000 %					Α	291.
Capital	8.00000000 %	8.0000000 %		-		***		
			İ				W*	STMT
K Partner's share of liabiliti	•		-	0-4	-1	(1)	AND MICHAEL CO.	gradien in the desire of the section
Nonrecourse			14 A	Sen-em	ployment earni	ngs (loss) 0 .	ļ	
Qualified nonrecourse fir	·	0.		-	Marie A Carriot a description			The second secon
Recourse	\$	Ų.						
	A 1 1		*0.	o ottoo	had atatama	nt for ode	lition	i information
L Partner's capital accoun	•	145,364.	1	e anac	neu stateme	HIL IOF AUC	ILIOH	al information.
Beginning capital accour Capital contributed durin								
Current year increase (de		38,502.						
Withdrawals & distribution	vicase) . \$	38,502. 16,400. ₎	≥					
		167,466	6					
Ending capital account .	· · · · \$	107,400	For IRS Use Only					•
☑ Tax basis [GAAP Secti	ion 704(b) book	1 5					
Other (explain)	_ GAME ☐ Secti	104(D) DOOK	E					
Culer (explain)			ġ					
BA Didaharananan na n		i	۱ "					
	te property with a built-in g No	ain of ioss?						
	No ement (see instructions)							
ii ies , altacii state	อเกอกเ <i>เ</i> (จอฮ แจแขตแดแร)		1					

SCHEDULE K-1 NON	DEDUCTIBLE EXPENSES, BOX 18, CODE C	
DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
LIFE INSURANCE		1,830
TOTAL TO SCHEDULE K-1, B	OX 18, CODE C	1,830.
SCHEDULE K-1	OTHER INFORMATION, BOX 20, CODE W	
DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
FED ESTIMATED TAX PYMT-12/21/2007		14,000
MT ESTIMATED TAX PYMT-12/21/2007		2,400

				L	_ Final K-		Amended		OMB No. 1545-0099
	dule K-1		2009	Pa	rt III	Partner's S	hare o	f Cui	rrent Year Income,
(For	n 1065)		<u> </u>			Deductions	, Cred	its, a	and Other Items
Depart	ment of the Treasury	For calendar	year 2009, or tax	1	Ordinary	business income (loss)	15	Credits
Interna	Revenue Service	_	g, 2009				0.		
			, 20	2	Net renta	Il real estate incom	ie (loss)		* - · ·
Dark	ner's Share of Inco					7	39,190.		
		•	•	3	Other ne	t rental income (lo	ss)	16	Foreign transactions
Cred	lits, etc.	See back of form ar	nd separate instructions.		A. T. S.		*		
Pa	art Information Ab	out the Partn	ership	4	Guarante	ed payments	~يىن	S-a.	*
Δ	Partnership's employer identifica	ation number	•		C.P.)	6	77	
	r arthersisp o employer rechance	adon namber	- A -	⁄5 ′\	Interest i	ncome	1 1/2		
В	Partnership's name, address, cit	ty state and 7ID cor	40 62 4 2		1000		292.		Þ
	•	.y, state, and zir coc		6a	Ordinary	dividends	1 13	. القول في	
	er industrial Park LP N 15th Ave, Suite 103					21 1 1 1 1 E			
	man, MT 59715	- 09		6b	Qualified	dividends			
					- []				
		// // //		7	Royalties	5 m)
С	IRS Center where partnership fil	lod roturn	4 50	7	90				· 4
	n, UT	ed retain		8	Net shor	t-term capital gair	(loss)		4 T C T T T T T T T T T T T T T T T T T
D	Check if this is a publicly tra	adad partnarahin (PT	D)			r tonn oupnus gus	(.000)		
	Check it this is a publicly tra	tued partnership (E.)		9a	Net long	-term capital gain	(loss)	17	Alternative minimum tax (AMT) items
I Pa	rt II Information Ab	out the Partn	er	"	140t long	term capital gain	(1033)	A	234.
		TA A		9b	Collectib	les (28%) gain (los	ce)		
E	Partner's identifying number			"	Collection	iles (2070) gain (io.	33)		· }
<u> </u>	Dada da			9c	Unrecan	tured section 1250) gain		Quantities and an annual and an analysis of the second sec
F	Partner's name, address, city, s	tate, and ZIP code		"	·	tarea section 120	y gain		1
	ent Filippini Price Road			10	Net sect	ion 1231 gain (loss	2)	18	Tax-exempt income and
	Forks, MT 59752				:	ion reor gain (ioo	-,		nondeductible expenses
				11	Other inc	come (loss)		C*	1,829.
				''	1	(1000)		· • • • • • • • • • • • • • • • • • • •	, , , , , , , , , , , , , , , , , , ,
G	General partner or LLC	✓ Limited r	partner or other LLC				EMPRESSON STORAGE		
	member-manager	member	Survivor Or Other EEO						функты макелина при при при при при при при при при при
н	✓ Domestic partner	☐ Foreign p	nartner	A					
''	Domestic parties	L Toleight	partite					19	Distributions
١.	What type of entity is this partne	ndividual		12	Section	179 deduction		A	16,400.
 	• •		-#:\.	'-	Cootion	170 0000000			The state of the s
ľ	Partner's share of profit, loss, ar Beginning	io capital (see instru	Ending	13	Other de	eductions			
		00000 %	8.000000 _%	A	Other de	sudctions	160.	20	Other information
l		00000 %			-		100.	20	Other information
İ		00000 %	8.0000000 <u>%</u> 8.0000000 <u>%</u>					Α	292.
	Capital 8.000	30000 %	8.000000 %		:	***************************************		KU MOWALI SOTTU TUK	
ĸ	Partner's share of liabilities at ve	ar and			1			W*	STMT
	Nonrecourse	•		14	Self-em	oloyment earnings	(loss)		
	Qualified nonrecourse financing			A			0.		
	Recourse	\$	0.		· · · · · · · · · · · · · · · · · · ·				
		. •							\$
L	Partner's capital account analys	eie.		*Se	e attacl	ned statement	for ado	lition	al information.
-	Beginning capital account		145,366		o unuo	iou otatomoni	101 440	······································	ar information.
	Capital contributed during the ye								
	Current year increase (decrease)								
	Withdrawals & distributions .	\$ (≥					
	Ending capital account	\$	167,468.	ŏ					
				For IRS Use Only					
1	✓ Tax basis	NP Section	n 704(b) book	SL					
	Other (explain)		÷ ÷	≝					
]			•	Fo.					
м	Did the partner contribute prope	erty with a built-in ga	in or loss?	_					
	Yes No	, gu							
L	If "Yes", attach statement ((see instructions)							

SCHEDULE K-1 NON	DEDUCTIBLE EXPENSES, BOX 18, CODE C	
DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
LIFE INSURANCE		1,829
rotal to schedule K-1, B	OV 19 CODE C	1,829.
SCHEDULE K-1	OTHER INFORMATION, BOX 20, CODE W	
		•
DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
DESCRIPTION FED ESTIMATED TAX PYMT-12/21/2007	PARTNER FILING INSTRUCTIONS	AMOUNT 14,000

				L	_ Final K-		Amended		OMB No. 1545	-0099
	edule K-1 m 1065)		2009	Pa			3 1 4 4 6		rrent Year Income, and Other Items	
Depar	tment of the Treasury	For cal	endar year 2009, or tax	1		business income			Credits	
Intern	al Revenue Service		eginning, 2009	1	1	, s	္) 0.			
			ding, 20	2	Net renta	I real estate inco	ome (loss)		***************************************	
Par	tner's Share of In	come. Dec	luctions.		3		39,191.			
	dits, etc.		orm and separate instructions.	3	Other net	t rental income	loss)	16	Foreign transactions	
P	art I Information	About the P	artnership	4	Guarante	ed payments	200	2>		
A	Partnership's employer iden	tification number	- A	5	Înterest i	ncome (
В	Partnership's name, address	e city state and	7IP code	163	,3,0,001	()	291.			
1	ger industrial Park LP	s, oky, state, and i	Zii Gode	6a	Ordinary	dividends	A H	California.		
	N 15th Ave, Suite 103				L G	0 L 6			• •	
Boze	eman, MT 59715			6b	Qualified	dividends				
						7450			·	
L] 🕫	Royalties	Security Control of the Control of t				
С	IRS Center where partnersh	ip filed return		6 -4	9 -				Ommittee 2	
	en, UT			8	Net short	t-term capital ga	ain (loss)			
D	Check if this is a public	ly traded partners	nip (PTP)		Al-Al		i= (1===)	47	Allowative minimum to the (ANAT)	
Ð	art II Information	About the E	Partner	9a	Net long-	-term capital ga	in (loss)	17 A	Alternative minimum tax (AMT)	235.
		man a de la companya		9b	Collectib	les (28%) gain (nee)		**************************************	233.
E	Partner's identifying number	•		""	Concons	105 (20 70) gain (033)			İ
F	Partner's name, address, cit	tv. state. and ZIP	code	9c	Unrecap	tured section 12	50 gain			
Lisa	Edwards	,			*					ĺ
	Prieldstone Drive West			10	Net secti	ion 1231 gain (lo	ss)	18	Tax-exempt income and	
Boz	eman, MT 59715							C*	nondeductible expenses	-
				11	Other inc	come (loss)			1,	830.
<u> </u>		[7]			<u>.</u>		. 1817 - To door a physiological de			İ
G	General partner or LLC member-manager		mited partner or other LLC ember		4				**************************************	
н	✓ Domestic partner	Пъ	preign partner	Bertomore (1) re-come (sec. 1)	i alta menerala de la comunicación de la comunicación de la comunicación de la comunicación de la comunicación de					ŀ
l "	E Domestio partier	۵.۰	reight partiter		100			19	Distributions	
,	What type of entity is this pa	artner? Individu	al	12	Section	179 deduction		Α		400.
j	Partner's share of profit, loss	s, and capital (see	instructions):		e recovered				CONTRACTOR CONTRACTOR	
İ	Beginning		Ending	13	Other de	ductions				
		00000000 %	8.0000000 %	Α			160.	20	Other information	
		00000000 %	8.0000000 %					A		291.
	Capital 8.0	00000000 %	8.0000000 %		·					
i								w*	s	тмт
K	Partner's share of liabilities a Nonrecourse			14	Self-emr	oloyment earning	re (loce)			
	Qualified nonrecourse finance	-		A	Oell-ellip	noyment earning	js (1055) 0 .			
	Recourse	<u> </u>	0.		 	v 122	: :::::::::::::::::::::::::::::	****************	Contraction (Contraction (Contr	
		· 								
L	Partner's capital account an	nalysis:		*Se	e attach	ned statemer	nt for add	lition	al information.	
	Beginning capital account .	\$	145,364.							
	Capital contributed during the									
	Current year increase (decre	ease) \$	38,502.	Ι.						
	Withdrawals & distributions		16,400.)	Į Ę						
ļ	Ending capital account	\$	167,466.	For IRS Use Only						
	☑ Tax basis ☐ 0	GAAP 🗌	Section 704(b) book	Ιχ						
	Other (explain)	u~~r ∟	Georgia 704(D) DOOK	R						
			•	ď						
м	Did the partner contribute p	roperty with a buil	t-in gain or loss?	-						
	☐ Yes ☐ I		•							

If "Yes", attach statement (see instructions)

SCHEDULE K-1	NONDEDUCTIBLE EXPENSES, BOX 18, CODE C	
DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
LIFE INSURANCE		1,830.
COTAL TO SCHEDULE K-	1, BOX 18, CODE C	1,830.
SCHEDULE K-1	OTHER INFORMATION, BOX 20, CODE W	
SCHEDULE K-1 DESCRIPTION	OTHER INFORMATION, BOX 20, CODE W PARTNER FILING INSTRUCTIONS	AMOUNT .
<u> </u>		AMOUNT 14,000

				[Final K-1		Amended		OMB No. 1545-0099
	edule K-1 m 1065)		2009	Pa		the second of the second	A 2 2	. am Time	rent Year Income, and Other Items
	tment of the Treasury	For calendar	year 2009, or tax	1	Ordinary b	ousiness income	(loss)	15	Credits
Intern	al Revenue Service	year beginnin	g, 2009			6	<u>)</u> 0.		·
		ending _	, 20	2	Net rental	real estate inco	ne (loss)		
Par	tner's Share of In	come. Deduct	ions.				39,190.		·
	dits, etc.	-	nd separate instructions.	3	Other net	rental income (l	oss)	16	Foreign transactions
Р	art I Information	About the Partn	ership	4	Guarante	ed payments			<u> </u>
A	Partnership's employer iden	itification number	_ A _		Interest in	come	. (
В	Partnership's name, address	s, city, state, and ZIP co-	de 🖂 🤇				291.	$\mathcal{D}_{\mathcal{I}}$	
Brid	ger industrial Park LP			6a	Ordinary	dividends \	N.		
1276	N 15th Ave, Suite 103				a ()	14 11			
Boze	eman, MT 59715			6b	Qualified	dividends			
		 							
		<u>_\</u>] 7	Royalties				*
C.	IRS Center where partnersh	ip filed return	- # & <i>I</i>		/		4 \		\$
	en, UT			8	Net snort	-term capital gai	n (loss)		<i>‡</i>
D	Check if this is a public	ly traded partnership (PT	P	9a	Net long-	term capital gair	(loss)	17	Alternative minimum tax (AMT) items
IΡ	art II Information	About the Partn	er	1 "	;	torri ouphur guii	1 (1000)	A	235.
E	Partner's identifying numbe	E-7	J)	9b	Collectible	es (28%) gain (lo	oss)		*
	, a , ,								
F	Partner's name, address, ci	ty, state, and ZIP code		9с	Unrecapt	ured section 125	60 gain		*
Lan	ce Edwards				*		,		
	Prieldstone Drive West eman, MT 59715			10	Net section	on 1231 gain (los	ss)	18	Tax-exempt income and nondeductible expenses
502	eman, Mr. 33713			-	OII :			C*	•
				11	Other inc	ome (loss)			1,830.
G	General partner or LLC	/ Limited	partner or other LLC	***************************************	: ::::::::::::::::::::::::::::::::::::		····		
	member-manager	member						Same Control of the C	
н	✓ Domestic partner	☐ Foreign	partner		į				
								19	Distributions
ı	What type of entity is this pa	artner? Individual		12	Section 1	79 deduction		Α	16,400.
J	Partner's share of profit, los	s, and capital (see instru	,						
	Beginning	ŀ	Ending	13	Other dec	ductions			
		00000000 %	8.0000000 %	A			160.	20	Other information
		00000000 %	8.0000000 %					Α	291.
	Capital 8.0	00000000 %	8.0000000 %		*	THE RESIDENCE OF THE PERSON OF	MINISTERNAL COMPANIES CALL AND A	desire a "Seculo de	to the second of
ĸ	Partner's share of liabilities	at year and:						W*	STMT
"	Nonrecourse	-		14	Self-empl	loyment earning	s (loss)		
	Qualified nonrecourse finance	cing . \$		A			0.		
	Recourse		0.						
<u> </u>				<u> </u>				L	
L	Partner's capital account ar	•	445.000	*Se	e attach	ed statemen	t for ado	litiona	al information.
	Beginning capital account								
	Capital contributed during the Current year increase (decrease)		38,500.						
	Withdrawals & distributions			<u>></u>					
	Ending capital account .		167,463.	ð					
	<u> </u>			Jse					
	✓ Tax basis	GAAP Section	n 704(b) book	For IRS Use Only					
	Other (explain)			1 E					
			-	L					
м	Did the partner contribute p		in or loss?						
ı	☐ Yes ☐	INO		1					

If "Yes", attach statement (see instructions)

SCHEDULE K-1	NONDEDUCTIBLE EXPENSES, BOX 18, CODE C	
DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
LIFE INSURANCE		1,830
TOTAL TO SCHEDULE K-1	BOX 18. CODE C	1,830.
SCHEDULE K-1	OTHER INFORMATION, BOX 20, CODE W	
SCHEDULE K-1 DESCRIPTION	OTHER INFORMATION, BOX 20, CODE W PARTNER FILING INSTRUCTIONS	AMOUNT

					Final K-		Amended		OMB No. 1545-0099
Sch	edule K-1		2009	Pa	rt III	Partner's	Share o	f Cu	rrent Year Income,
(For	m 1065)		<u> </u>	ÇETELE.		Deduction	s, Cred	its, a	ind Other Items
Depar	tment of the Treasury	For calendar	year 2009, or tax	1	Ordinary I	business incom	e (loss)	15	Credits
Interna	al Revenue Service	year beginnin	g, 2009	ł		نم .	⑤ 0.		
			, 20	2	Net rental	real estate inc	ome (loss)		
D	maria Chara of Inc.	_				£	9,798.		
	tner's Share of Inc	•	•	3	Other net	rental income	(loss)	16	Foreign transactions
Cre	dits, etc. ▶	See back of form a	nd separate instructions.				/		
P	art I Information A	bout the Partn	ership	4	Guarante	ed payments			
					CE,)	12		
Α	Partnership's employer identific	cation number	_ A	6	Interest in	come 6	<u> </u>		
_			 		initorost II	loome [73.		,
В	Partnership's name, address, o	city, state, and ZIP co	de 🗼 🐪	6a	Ordinany	dividends			
	ger industrial Park LP N 15th Ave, Suite 103			"		awaelas			:
	eman, MT 59715			6b	Ouglified	dividends			
	,			್ಷ	Qualified	dividends			·
		11 11) _ (i	7	Royalties				
				6	Hoyaines				
C	IRS Center where partnership t	iled return		8	Nat -1	+ + + + + + + + + + + + + + + + + + +	oin (lees)		Openicani sa no como a manamanamani in como momento e como
— -	en, UT			l ⁸	Net snort	-term capital g	ain (ioss)		
D	Check if this is a publicly t	raded partnership (PT	P)	⊢				-	
				9a	Net long-	term capital ga	iin (loss)	17	Alternative minimum tax (AMT) items
P	art II Information A	bout the Parth	er i i i i i i i i i i i i i i i i i i i	!	1			Α	59.
E	Partner's identifying number		j	9b	Collectib	les (28%) gain ((loss)		
					-				
F	Partner's name, address, city,	state, and ZIP code		9c	Unrecapt	tured section 12	250 gain		
G&N	l enterprises, LLC			L	<u> </u>				
•	N 15th Avem Suite 103			10	Net secti	on 1231 gain (le	oss)	18	Tax-exempt income and
Boz	eman, MT 59715				·			C*	nondeductible expenses
1				11	Other inc	ome (loss)			457.
L					edomen on a second	The state of the S	Manager Manager of the Company of th		
G	General partner or LLC		partner or other LLC					ļ	
	member-manager	member							
н	✓ Domestic partner	Foreign	partner	ļ					
								19	Distributions
1	What type of entity is this partr	er? Partnership		12	Section 1	179 deduction		Α	4,100.
J	Partner's share of profit, loss, a	and capital (see instru	ctions):						
	Beginning		Ending	13	Other de	ductions			
	Profit 2.000	000000 %	2.0000000 %	A	***		40.	20	Other information
	Loss 2.000	000000 %	2.0000000 %						70
	Capital 2.000	000000 %	2.0000000 %		*			Α	73.
		•		emore in .					
ĸ	Partner's share of liabilities at y	ear end:							
ŀ	Nonrecourse	\$		14	Self-emp	loyment earnin	gs (loss)		indigent and discuss 19 to the control of the contr
ļ	Qualified nonrecourse financing			A	*		0.		
	Recourse	\$		Marks Visc States	agas sarro a e accessada		INGULARIZATION (U.S.)		
Ì				1	1				-
L	Partner's capital account analy	/sis:		*Se	e attach	ed stateme	nt for add	lition	al information.
	Beginning capital account .		38,499		·····				
	Capital contributed during the								
	Current year increase (decreas								
	Withdrawals & distributions	\$ (<u> </u>					
	Ending capital account	\$	44,025	For IRS Use Only					
	J	Ť	,	Se					
	☐ Tax basis ☐ GA	AP Section	on 704(b) book	SU					
	Other (explain)		יייי בייעשע שששיי	ľΨ					
				įς					
м	Did the partner contribute prop	nerty with a built-in or	ain or loss?	"					
1 .41	Yes No		uri Oi 1055?						
	If "Yes", attach statement			1					
		,							

SCHEDULE K-1	NONDEDUCTIBLE EXPENSES, BOX 18, CODE C	
DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
LIFE INSURANCE		457.
	K-1, BOX 18, CODE C	457.

				<u> </u>	Final K		Amended		OMB No. 1545-0099
Sche	dule K-1		$ \mathcal{A} \cap \mathbf{A} \cap \mathbf{A} $	Pa	rt III	Partner's	Share o	f Cui	rrent Year Income,
(Forn	n 1065)		2009	12 Page 15	15070 E 10	Deductio	ns, Cred	its, a	ind Other Items
Departi	ment of the Treasury	For calendar v	ear 2009, or tax	1		business incor	****		Credits
•	Revenue Service	•	•				\\		
			9, 2009	<u> </u>	NI-AA-		©Z ->≤> a>	ļ	i
		ending _	, 20	2	iver renta	al real estate in	13.5 X 1		
Part	ner's Share of Incor	me, Deducti	ions,	ļ			9,797	 	*************************************
		-	nd separate instructions.	3	Other ne	et rental income	e (loss)	16	Foreign transactions
	•				<u> </u>		J.		···
Pa	irt I Information Abo	out the Partn	ership	4	Guarante	eed payments	7		
Α	Partnership's employer identificat	tion number	4			9			
				/5 ^	Interest i	income ,	$\sim 2/c$	Z_{Λ}	
В	Partnership's name, address, city	v state, and ZIP coo	de G		NIF		73		
	Iger Industrial Park, LP	,,,		6a	Ordinary	dividends.	(1) P	-in-	A
	6 N 15th Ave, Suite 103		CANA BY BY	l		4 17 17	1		
ł .	eman, MT 59715			6b	Qualified	dividends	<i>)</i>		
	•	製 /シーシー			(A)				
		// // #	A 0		131 M			b	
		- / / / / / / "	- IA	(Z)	Royaltie	S/*			İ
	IRS Center where partnership file	ed return		<u> </u>	7-				,
Ogo	len, UT	ν·	<u> </u>	8	Net shor	rt-term capital	gain (loss)		
D	Check if this is a publicly trace	ded partnership (PTI	P)		:				
		(A		9a	Net long	j-term capital ç	ain (loss)	17	Alternative minimum tax (AMT) items
Pa	rt II Information Ab	out the Partn	er					Α	58
E	Partner's identifying number	127	Jan 1980	9b	Collectib	oles (28%) gair	(loss)	Maria Control	>
_	ratio o radialynig hambol	\display \di							
F	Dortnaria nama addresa aibi at-	ata and ZID anda	· · · · · · · · · · · · · · · · · · ·	9c	Unrecan	tured section	1250 gain	<u></u>	
l	Partner's name, address, city, sta	ate, and ZIP code		**	O.mooup		.200 ga		:
	rkind Properties, LLP						7 \	40	·
	Box 10580 eman, MT 59719			10	Net sect	tion 1231 gain	ioss)	18	Tax-exempt income and nondeductible expenses
502	eman, wii 33713							C*	Trondedadelale expenses
l				11	Other in	come (loss)		emercanical con-	458
G	General partner or LLC	Limited p	partner or other LLC						4
l	member-manager	member			1				
н	✓ Domestic partner	Foreign p	oartner '		*				
	·	,						19	Distributions
١,	What type of entity is this partner	? Partnership		12	Section	179 deduction		1	
			-#i\.						An annual control of the control of
J	Partner's share of profit, loss, and Beginning	u capital (see instruc	Ending	13	Othor de	eductions		1	
					Other de	eductions	40		
		0000 %	2.0000000 %	A	or: - water to reconstruints of	AT THE RESIDENCE OF THE PARTY O	40	20	Other information
		0000 %	2.0000000 %	l				Α	73
	Capital 2.000	0000 %	2.0000000 %		·	- W - MANUARY STREET, WHO STREET, WAS STRE	MODITURE STORMANOSTERNOS ASSESSEDANOS OLO	A MARKET MINORALIA	
								w*	STMT
κ	Partner's share of liabilities at yea	ar end:							V 1 W 1
	Nonrecourse	. \$		14	Self-em	ployment eami	ngs (loss)		1
	Qualified nonrecourse financing	. \$:				? *
	Recourse	. \$	269,499						
					į.			•	
L	Partner's capital account analysis	is:		*Se	e attacl	hed statem	ent for add	lition:	al information.
1	Beginning capital account		36,339						
1	Capital contributed during the ye								
l	Current year increase (decrease)								
ı	Withdrawals & distributions .			>					
l		. \$ (=					
l	Ending capital account	. \$	41,864	For IRS Use Only					
				ຶ					
1	☐ Tax basis ☐ GAAF	P L Sectio	n 704(b) book	Ş					
l	Other (explain)			=					
				<u>ا</u> د					
м	Did the partner contribute proper	rty with a built-in ga	in or loss?						
1	Yes No			1					
	If "Yes", attach statement (s	see instructions)							

SCHEDULE K-1	NONDEDUCTIBLE EXPENSES, BOX 18, CODE C	
DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
LIFE INSURANCE		458
TOTAL TO SCHEDULE K-1	BOY 18 CODE C	458
SCHEDULE K-1	OTHER INFORMATION, BOX 20, CODE W	
	OTHER INFORMATION, BOX 20, CODE W PARTNER FILING INSTRUCTIONS	AMOUNT
SCHEDULE K-1 DESCRIPTION FED ESTIMATED TAX PYMT-12/21/2007		AMOUNT 3,500